Form 990-T	Exempt Orga	nization Rus	sine	ss Inco	me T	ax Refurr	·· . · · · l	OMB No 1545-0047
Form 990-1		ind proxy tax und				1917	·	0040
	For calendar year 2019 or other tax ye	ear beginning		, and en	nding			2019
Popartment of the Treasury	•	v irs gov/Form990T for in					ŀ	Open to Public Inspection for
Internal Revenue Service	Do not enter SSN numb					ation is a 501(c)(3)		501(c)(3) Organizations Only over identification number
A Check box if address changed	Name or organization (Check box if name c	nanged	i and see instru	ictions.)		(Emp	loyees' trust, see uctions)
B Exempt under section	Print Adventist H	ealth System	m/S	unbelt,	Inc.	•	5	9-1479658
X 501(c 4/3)	or Number, street, and roo	m or suite no. If a P.O. box						ated business activity code instructions)
408(e) 220(e)	^{Type} 900 Hope Wa						↓ `	•
408A	City or town, state or pro Altamonte S	ovince, country, and ZIP o		n postal code 714			621	500
C Book value of all assets	E Group exemption num	her (See instructions.)		1071			021	
8,921,698,7	65. G Check organization type	oe ▶ X 501(c) corp	poratio	n 50°	1(c) trust	401(a) trust	Other trust
	organization's unrelated trades or	businesses. 🕨 <u>1</u>	7			the only (or first) ui		
trade or business here						complete Parts I-V.		T ₁
describe the first in the b business, then complete	lank space at the end of the previo	ous sentence, complete Pa	arts I ar	id II, complete a	a Schedule	M for each addition	nal trade	or A
	the corporation a subsidiary in an	affiliated orono or a parer	nt-subs	idiary controlle	d aroun?	Stmt 2▶	X Y	es No!
	ind identifying number of the pare			-59	- 21	10012	··	,,
	▶ Paul Rathbun				Teleph		_)357-2419
	Trade or Business Inc	,		(A) Inco	ome	(B) Expense	<u>s</u>	(C) Net
1a Gross receipts or sale		1		5,864,	596	-		
b Less returns and allow2 Cost of goods sold (S		c Balance	1c 2	3,004,	, 300.		1	
3 Gross profit. Subtract			3	5,864,	586.	,		5,864,586.
4a Capital gain net incon	ne (attach Schedule D)		4a			, /		
b Net gain (loss) (Form	4797, Part II, line 17) (attach Forr	n 4797)	4b			/ .		
c Capital loss deduction			4c			· · ·		
· · · ·	partnership or an S corporation (a	ittach statement)	5		/	*,1	-	
6 Rent income (Schedu7 Unrelated debt-finance	ed income (Schedule E)		7			, <u>, , , , , , , , , , , , , , , , , , </u>		
	ralties, and rents from a controlled	organization (Schedule F)	8					
	a section 501(c)(7), (9), or (17) o	-	9 ,					
10 Exploited exempt acti	vity income (Schedule I)		10					
11 Advertising income (S	•		11					
•	structions; attach schedule)		12	5,864,	586	*	`-	5,864,586.
13 Total Combine lines Part 1 Deductio	ns Not Taken Elsewhe	e (See instructions fo	13 or limita			<u> </u>		5,004,500.
(Deductions	must be directly connected w	ith the unrelated busin	ess in	come) -				
14 Compensation of off	icers, directors, and trustees (Sch	dule K)RECEIVE	ED				14	
15 Salaries and wages		<u> </u>		ıgl			15	1,649,010.
16 Repairs and mainten	ance	[일 NOV 1 8 20	าวก	RS-OSC			16	4,936.
17 Bad debts	dulo) (ann unatrustions)	(m)	,,,	RS.			17	212,166.
18 Interest (attach sche19 Taxes and licenses	dule) (see instructions)	OGDEN,	UT	-			18	61,557.
20 Depreciation (attach	Form 4562)	OODEN,	"		20	4,735.		
· · · · · · · · · · · · · · · · · · ·	umed on Schedule A and elsewher	e on return		r -	21a		21b	4,735.
22 Depletion							22_	
,	rred compensation plans						23	254 126
24 Employee benefit pro	=						24	354,136.
25 Excess exempt expenses26 Excess readership company							25 26	
27 Other peductions (at				See	Stat	ement 1	27	2,622,503.
,	dd lines 14 through 27						28	4,909,043.
,	axable income before net operation						29	955,543.
/	erating loss arising in tax years be	ginning on or after Januar	ry 1, 20	118			_	
(see instructions)	avable income. Cubtreet line 20 for	om line 20					30 31	955,543.
	axable income. Subtract line 30 from Paperwork Reduction Act Notice					951		Form 990-T (2019)
	,	.,				シンフレ	M.	\·•/

F 000 T (0046	Adventist Health System/Sunbelt, Inc.	•	59	-1479658 -
	Total Unrelated Business Taxable Income		<u> </u>	<u>-14/3036</u> P
	unrelated business taxable income computed from all unrelated fraces or businesses (see instructions)		32	1,337,99
33 Amour	s paid for disallowed fringes	1	33	
34 Charita	ole contributions (see instructions for limitation rules)	ι	<u> </u>	130,45
	related business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lin	nes 32 and 3 3	<i></i>	1,207,54
	on for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		36	1 207 54
	unrelated business taxable income before specific deduction. Subtract line 36 from line 35	9	$\frac{37}{3}$	1,207,54
	ededuction (Generally \$1,000, but see line 38 instructions for exceptions) ed business taxable income Subtract line 38 from line 37. If line 38 is greater than line 37,	ι	38	1,00
	e smaller of zero or line 37	1	39	1,206,54
Part IX	Tax Computation		1	
	ations Taxable as Corporations Multiply line 39 by 21% (9-31)	▶	40	253,37
41 Trustš	axable at Trust Rates See instructions for tax computation Income tax on the amount on line 39 from:	•		
	x rate schedule or Schedule D (Form 1041)		- 41	
_	x See instructions	•	42	
	ive minimum tax (trusts only)		43	
	Noncompliant Facility Income See instructions		46	253,37
	dd lines 42, 43, and 44 to line 40 or 41, whichever applies		1 40	233,37
	tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a	-		
▼- 1	edits (see instructions) 46b		7	
	business credit. Attach Form 3800			
d Credit	or prior year minimum tax (attach Form 8801 or 8827)			
e Total c	edits. Add lines 46a through 46d	-	46e	
47 Subtra	t line 46e from line 45		47	253,37
48 Other t	xes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (at	ttach schedule)	. —	
	x Add lines 47 and 48 (see instructions)	L	t 49	253,37
	t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3		50	
		1,117		
		00,000	-	
	osited with Form 8868		-	
•	organizations: Tax paid or withheld at source (see instructions) 51d		-	•
	withholding (see instructions) or small employer health insurance premiums (attach Form 8941) 516 517		\dashv	
	edits, adjustments, and payments: Form 2439		╡	
	rm 4136 Other Total 51g			
	yments. Add lines 51a through 51g		52	1,011,11
•	ed tax penalty (see instructions). Check if Form 2220 is attached		53	
54 Tax du	. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	, ▶	54	
55 Overpa	ment If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	[0 ▶	55	757,74
56′ Enter ti		nded 🕨	56	
	Statements Regarding Certain Activities and Other Information (see instruct			
Part VI		ions)		
Part VI 57 At any	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority	ions)		Yes
Part VI 57 At any over a	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	ions)		Yes
57 At any over a FinCEN	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority	ions)		
Part VI 57 At any over a FinCEN here	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			
57 At any over a FinCEN here 58 During	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign			
57 At any over a 1 FinCEN here 58 During If "Yes,	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file.			
57 At any over a FinCEN here 58 During If "Yes, 59 Enter the U	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. a amount of tax-exempt interest received or accrued during the tax year der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the both	ı trust?	ledge and b	
57 At any over a FinCEN here 58 During If "Yes, 59 Enter the	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. The amount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during tax year.	i trust?		relief, it is true,
57 At any over a 1 FinCEN here 58 During If "Yes, 59 Enter the Sign	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. The amount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during the tax year seemount of tax-exempt interest received or accrued during tax year.	n trust?	May the IRS	relief, it is true,
57 At any over a 1 FinCEN here 58 During If "Yes, 59 Enter the Sign	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. a amount of tax-exempt interest received or accrued during the tax year der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the both	n trust?	May the IRS	pelief, it is true, 6 discuss this return with r shown below (see
57 At any over a 1 FinCEN here 58 During If "Yes, 59 Enter the Sign	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. Be amount of tax-exempt interest received or accrued during the tax year separatives of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the beforect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Colored Date Asst Secretary Title	n trust?	May the IRS	relief, it is true, 6 discuss this return with r shown below (see s)? Yes
57 At any over a FinCEN here 58 During If "Yes, 59 Enter the Sign Here	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. a amount of tax-exempt interest received or accrued during the tax year der penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the borect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer Date Preparer's signature Date C. C. C. C. C. C. C. C. C. C	n trust?	May the IRS the prepare instructions	relief, it is true, 6 discuss this return with r shown below (see s)? Yes
57 At any over a FinCEN here 58 During If "Yes, 59 Enter the Sign Here	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. a amount of tax-exempt interest received or accrued during the tax year der penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the borect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Signature of officer Date Preparer's signature Date C. C. C. C. C. C. C. C. C. C	n trust?	May the IRS the prepare instructions	relief, it is true, 6 discuss this return with r shown below (see s)? Yes
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57 At any over a FinCEN here 58 During If "Yes, 59 Enter the Sign Here Paid Preparer	me during the 2019 calendar year, did the organization have an interest in or a signature or other authority nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign see instructions for other forms the organization may have to file. Be amount of tax-exempt interest received or accrued during the tax year seminance of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the be rect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Asst Secretary Print/Type preparer's name Preparer's signature Date C. Signature Print/Type preparer's name	heck employed	May the IRS the prepare instructions If PTII	relief, it is true, 6 discuss this return with r shown below (see s)? Yes

Schedule A - Cost of Good	Is Sold. Enter	method of inver	ntory valuation N/	A		
1 Inventory at beginning of year			6 Inventory at end of ye			6
2 Purchases	2		7 Cost of goods sold.		line 6	-
3 Cost of labor	3		from line 5. Enter her		i '	* *
4a Additional section 263A costs			line 2			7
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or			3 1
5 Total. Add lines 1 through 4b	5		the organization?	00400	o roi robaio, apply to	+ '
Schedule C - Rent Income		Property and		Lease	d With Real Prope	erty)
(see instructions)						··· ·· //
Description of property						-
(1)						
(2)		•	·.			
(3)			· · · · · · · · · · · · · · · · · · ·	•		
(4)		·· ·· 			·····	
	2. Rent receiv	ed or accrued				
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	and personal property (if the percent personal property exceeds 50% or if nt is based on profit or income)	age	3(a) Deductions directly of columns 2(a) and	connected with the income in d 2(b) (attach schedule)		
(1)		Ì				1
(2)			· · · · · · · · · · · · · · · · · · ·			
(3)		i				
(4)			· · · · · · · · · · · · · · · · · · ·		 	
Total	0.	Total		0.		-
(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 (8)	.
Schedule E - Unrelated Del	ot-Financed	Income (see	instructions)			
			2. Gross income from		Deductions directly conne to debt-finance	ected with or allocable d property
1. Description of debt-fi	nanced property		or allocable to debt- financed property	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)		-		1		
(2)						
(3)				1		
(4)				1		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis llocable to nced property schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column θ)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)	1		%			
(2)			%			
(3)			%			
(4)			%	1		
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (8)
Totals			•		0.	0.
Total dividends-received deductions II	icluded in column	8			, •	0.
					· · · · · · · · · · · · · · · · · · ·	Form 990-T (2019)

	Amundes,	Royaπies, a		Controlled O		d Organiza	tion	s (see in:	struction	is)
Name of controlled organiz	zation	2. Employer identification number	3. Net ur	related income e instructions)	4. To	tal of specified ments made	5. Part of column 4 t included in the controrganization's gross in		rolling	6. Deductions directly connected with income in column 5
(1)					 		-		-	
(2)										
(3)										
(4)										
Nonexempt Controlled Organ	nizations					-			•	
7. Taxable Income		ited income (loss) istructions)	9. Tota	l of specified paym made	nents	10. Part of colum in the controllin gross	nn 9 tha ng organ i income	nization's	11. De	ductions directly connected income in column 10
(1)				_	-					
(2)										
(3)		-	1				_	-		
(4)						-		-		
						Add colum Enter here and line 8, co	on page	1, Part I, A).	Enter h	id columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals	ant Income	of a Cooking	- F04/-\/-	7) (0) (4		!		0.		0.
Schedule G - Investme	tructions)	ot a Section	n sun(c)(A	7), (9), or (1	(/) Org	janization				
	scription of income			2. Amount of	ıncome	3. Deduction directly connect (attach schedu	ted	4. Set-		5. Total deductions and set-asides (col 3 plus col 4)
(1)										<u> </u>
(2)			•							
(3)										
(4)]					
Totals				Enter here and o Part I, line 9, coli				De la		Enter here and on page 1, Part I, line 9, column (B)
Schedule I - Exploited	Exempt Ac	tivity Incom	ne, Other	Than Adv		g Income	<u> </u>			<u> </u>
(see instr	uctions)									
Description of exploited activity	2. Gross unrelated busin income fror trade or busin	ness directly	xpenses connected roduction nrelated iss income	4. Net income from unrelated business (colominus column gain compute through its control of the column incompute its control of the column incompute its control of the column incompute its column incompute its control of the column incompute its column incompute i	trade or umn 2 3) If a cols 5	5. Gross inconfrom activity the is not unrelate business incom	at d	6. Exp attribute colun	ible to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)	·									
(4)	Enter here and page 1, Part line 10, col (/	I, page	ere and on 1, Part I, 0, col (B).							Enter here and on page 1, Part II, line 25
Totals ► Schedule J - Advertisi	ng Income					CHARLE THE	. دلکیه		12 Tat 76	0.
Part I: Income From				olidated F	Basis					·
1. Name of periodical	adve	Gross ertising come adv	3. Direct vertising costs	4. Advertis or (loss) (col col 3) If a gain cols 5 thre	2 minus n, compute	5. Circulation income	on	6. Reader costs		Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)				757X8	W. T					A COMPANY
(2)					沙龙		Į			
(3)				學記憶上	AS INTO					
/A\	1			7777	A MARIA PARA	7 7	1			A PROPERTY OF THE PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF THE
(4)				27 2 2 2 2 2		4	\rightarrow			AREA LINES LYLE
Totals (carry to Part II, line (5))		0.	0	Prayatian	2011.4.		\dashv	.		0.

%

Form 990-T (2019) Adventist Health System/Sunbelt, Inc. 59-14796

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) 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. 7. Excess readership 2. Gross 3. Direct 5. Circulation costs (column 6 minus column 5, but not more than column 4) 6. Readership advertising 1. Name of periodical advertising costs costs (1) (2) (3) (4) 0. 0. Totals from Part I ▶ 0. Enter here and on page 1, Part I, line 11, coi (A). Enter here and on page 1, Part I, line 11, col (B). Enter here and on page 1, Part II, line 26 0. 3. Percent of time devoted to business Compensation attributable to unrelated business (1) % (2) % (3) %

Form 990-T (2019)

0.

(4)

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

: 1

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Entity

Nam	e of the organization	/ 0	.b.14	T	Employer ide		
	Adventist Health System		ibeit,	Inc.	59-14	1/90	38
	Unrelated Business Activity Code (see instructions) 44611	. U					
	Describe the unrelated trade or business Pharmacy	_					
Pa	rt 17 Unrelated Trade or Business Income		(A) In	come	(B) Expense	es	(C) Net
1 a	Gross receipts or sales 7,113,539.	I			<u> </u>		
b	· · · · · · · · · · · · · · · · · · ·	1c	7.11	3,539			Ĭ
2	Cost of goods sold (Schedule A. line 7)	2					
3	Gross profit Subtract line 2 from line 1c	3	7,11	3,539			7,113,539.
4 a		4a			,		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
C	Capital loss deduction for trusts	4c			1.		
5	Income (loss) from a partnership or an S corporation (attach						<u> </u>
	statement)	5			1		
6	Rent income (Schedule C)	6					
7	Unrelated debt-financed income (Schedule E)	7			1		
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9					
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11		• •			-
12	Other income (See instructions, attach schedule)	12					
13	Total. Combine lines 3 through 12	13	7,11	3,539	.1		7,113,539.
Pai	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in			ons on d	eductions.) (De	ductio	ons must be
14	Compensation of officers, directors, and trustees (Schedule K)					14	
15	Salaries and wages					15	512,362.
16	Repairs and maintenance					16	
17	Bad debts					17	761.
18	Interest (attach schedule) (see instructions)					18	
19	Taxes and licenses		,		*** **	19	
20	Depreciation (attach Form 4562)			20			
21	Less depreciation claimed on Schedule A and elsewhere on return			21a		21b	
22	Depletion					22	
23	Contributions to deferred compensation plans			-		23	
24	Employee benefit programs					24	178,841.
25	Excess exempt expenses (Schedule I)					25	
26	Excess readership costs (Schedule J)					26	
27	Other deductions (attach schedule)		, Se	e Sta	tement 3	27	6,391,312.
28	Total deductions. Add lines 14 through 27					28	7,083,276.
29	Unrelated business taxable income before net operating loss deduc	tion S	lubtract line	28 from lir	ne 13	29	30,263.
30	Deduction for net operating loss arising in tax years beginning on or	r after .	January 1, 2	018 (see		\sqcup	<u> </u>
	instructions)			-	Stmt 4	30	30,263.
11	Unrelated business taxable income Subtract line 30 from line 29					31	<u> </u>
НΔ	For Panerwork Reduction Act Notice see instructions				9	chadul	a M (Form 990.T) 2019

Form 990-T (2019)

Form 990-T (2019) Adventist	Voalth	Cyatom/C	unh	.o1+	Tna		59-1479	Page
Schedule A - Cost of Good	s Sold. Ente	r method of inven	ton v	eluation	N/A		33-1473	7036
1 Inventory at beginning of year	1 1		т	Inventory			· · ·	6
2 Purchases	2		7	Cost of go	-		ing 6	· ·
3 Cost of labor			┤ ′	•				` ,
	3		┪		. Enter here	ano in i	ranti,	_
4a Additional section 263A costs				line 2			L	7
(attach schedule)	4a					•	with respect to	Yes No
b Other costs (attach schedule)	4b		┨			acquired	for resale) apply to	<u> </u>
5 Total. Add lines 1 through 4b	5 J	D	<u> </u>	the organiz				X
Schedule C - Rent Income (see instructions)	(From Real	——————————————————————————————————————		sonai Pr 	operty t	.ease	with Real Prope	erty)
Description of property		_						
(1)								
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accrued						
rent for personal property is more than of rent for pe			nd personal property (if the percentage arsonal property exceeds 50% or if at its based on profit or income)			connected with the income in d 2(b) (attach schedule)		
(1)								· ·
(2)								
(3)		,			_			· · · · · · · · · · · · · · · · · · ·
(4)					•			·
Total	0.	Total				0.		
c) Total income Add totals of columns nere 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	t-Financed	Income (see	ınstru	ctions)				
			2	. Gross incon	ne from		3. Deductions directly conne to debt-finance	
1. Description of debt-fin	anced property			or allocable to financed pro	debt-	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)								
(2)								- "
(3)						_		
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis illocable to nced property n schedule)	6	Column 4 di by column			7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)					%			
(2)					%			
(3)					%			
(4)					%			
		,					oter here and on page 1, art I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)

Total dividends-received deductions included in column 8

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

41.372

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). OMB No 1545-0047

2

372.

Internal Revenue Service Name of the organization

Adventist Health System/Sunbelt, Inc.

Employer identification number 59-1479658

Entity

Unrelated Business Activity Code (see instructions) > 453220 Part [] Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1a Gross receipts or sales **b** Less returns and allowances 41,372 c Balance 2 Cost of goods sold (Schedule A, line 7) 2 41,372 3 Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) ... 9 10 Exploited exempt activity income (Schedule I) 10 11 Advertising income (Schedule J) 11 12 Other income (See instructions, attach schedule) 12

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.)

14	Companyation of officers directory and by stone (Cabadyla IA	T	
	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	<u>8</u> ,303.
16	Repairs and maintenance	16	7.
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	15.
20	Depreciation (attach Form 4562) 20 1.	533	
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	1.
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	3,522.
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule) See Statement 5	27	40,460.
28	Total deductions. Add lines 14 through 27	28	52,308.
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	-10,936.
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see	£	
	instructions) Stmt 6	30	0.
31	Unrelated business taxable income Subtract line 30 from line 29	31	-10,936.
LUA	Say Denominal Production Act Nation and instructions		14/5 000 71 00 10

Total. Combine lines 3 through 12

<u>13</u>

Schedule M (Form 990-T) 2019

Entity	2
	Page
658	

Adventist	Health	System/S	unbelt, Inc.		59-1479	<u>658</u>
Schedule A - Cost of Good	Is Sold. Enter	method of inver	tory valuation N/	A		
1 Inventory at beginning of year	1		6 Inventory at end of ye	ear	_	6
2 Purchases	2		7 Cost of goods sold. S		ľ	. [
3 Cost of labor	3		from line 5. Enter her	e and in l	Part I,	<u> </u>
4a Additional section 263A costs			line 2		L	7
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to	Yes No
b Other costs (attach schedule)	4b		property produced or	acquired	I for resale) apply to	
5 Total. Add lines 1 through 4b	<u> </u>	5	the organization?			X
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	a with Real Prope	erty)
Description of property						
(1)						
(1)						
(2)				-		
(4)						<u> </u>
	2. Rent receiv	ed or accrued			T	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	nd personal property (if the percent ersonal property exceeds 50% or if it is based on profit or income)	age	3(a) Deductions directly c columns 2(a) and	onnected with the income in I 2(b) (attach schedule)		
(1)			<u> </u>			 ·
(2)	-					
(3)						
(4)			· · · · · · · · · · · · · · · · · ·			
Total	0.	Total		0.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	• 0.
Schedule E - Unrelated Deb	ot-Financed	Income (see	instructions)			
			2. Gross income from		3. Deductions directly conne to debt-finance	cted with or allocable d property
Description of debt-fit	nanced property		or allocable to debt- financed property	r allocable to debt- financed property (a)		(b) Other deductions (attach schedule)
(1)						
(2)				 		
(3)				1		
(4)						
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-finar	adjusted basis llocable to iced property schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)			%			
(2)			%			
(3)			%			
(4)			%			
					iter here and on page 1, art I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			•		0.	0.
Total dividends-received deductions in	cluded in column	8	· · · · · · · · · · · · · · · · · · ·			0.
						Form 990-T (2019)

Department of the Treasury Internal Revenue Service

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No 1545-0047

Entity

Open to Public Inspection for 501(c)(3) Organizations Only

Name of the organization Employer identification number Adventist Health System/Sunbelt, Inc. 59-1479658 Unrelated Business Activity Code (see instructions) > 531120 Describe the unrelated trade or business Nonresidential Building Rental Part 11 Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 1 a Gross receipts or sales b Less returns and allowances c Balance 10 2 Cost of goods sold (Schedule A, line 7) 2 3 Gross profit Subtract line 2 from line 1c 3 4 a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 6 14,118. 14,678 -560. Unrelated debt-financed income (Schedule E) 7 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Explorted exempt activity income (Schedule I) 10 10 Advertising income (Schedule J) 11 11 12 Other income (See instructions, attach schedule) 12 14,118. 14.678. -560. Total. Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 15 16 Repairs and maintenance 16 17 Bad debts 17 Interest (attach schedule) (see instructions) 18 18 Taxes and licenses 19 19 Depreciation (attach Form 4562) 20 Less depreciation claimed on Schedule A and elsewhere on return 21 22 Depletion 22 Contributions to deferred compensation plans 23 23 24 Employee benefit programs 24 25 Excess exempt expenses (Schedule I) Excess readership costs (Schedule J) 26 26 Other deductions (attach schedule) 27 27 0. Total deductions. Add lines 14 through 27 28 28 -560. Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 29 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see -560. Unrelated business taxable income Subtract line 30 from line 29 Schedule M (Form 990-T) 2019 LHA For Paperwork Reduction Act Notice, see instructions.

Adventist	Health	System/S	unbelt, Inc.	59-147	9658
Schedule A - Cost of Good	S SOIG. Ente	method of invent	1		
1 Inventory at beginning of year	1 1		6 Inventory at end of year		6
2 Purchases	2		7 Cost of goods sold. Si		ļ.
3 Cost of labor	3		from line 5. Enter here	and in Part I,	
4a Additional section 263A costs			line 2	0004 /	Van Lilia
(attach schedule)	4a		8 Do the rules of section	•	Yes No
b Other costs (attach schedule)	45			acquired for resale) apply to	- 1
5 Total. Add lines 1 through 4b Schedule C - Rent Income	Erom Real	Property and	Personal Property I	essed With Post Pron	ootu)
(see instructions)	(i rom mear	Property and	reisonal Floperty L	easeu willi neal Flop	er ty)
Description of property	·				
(1)					·
(2)		·			
(3)	<u> </u>				
_(4)	2. Rent receiv	ed or accrued			-
(a) From personal property (if the per rent for personal property is more	centage of	(b) From real an	nd personal property (if the percentages onal property exceeds 50% or if	ge 3(a) Deductions directly columns 2(a) a	connected with the income in nd 2(b) (attach schedule)
10% but not more than 50%) (1)		the rem	t is based on profit or income)	_	
(2)					
(3)				·	
(4)					-
Total	· · · · · · · · · · · · · · · · · · ·	Total	· · · ·		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column		ter		(b) Total deductions. Enter here and on page 1, Pert I, line 6, column (B)	_
Schedule E - Unrelated Deb		Income (see I	nstructions)	11211, 1110 0, 00 01111 (0)	<u></u>
		,	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)
					Statement 20
(1) Medical Building	Space		14,118.	0	. 14,678.
(2)				···	
(3)					
(4)	1	-			<u> </u>
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property n schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(e) and 3(b))
(1) 0.		0.	.00%	0	. 0.
(2)			%		
(3)			%		
(4)			%		
				Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals			▶ĺ	0	0.
Total dividends-received deductions in	cluded in column	8			0.

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Unrelated Business Taxable Income from an

Unrelated Trade or Business

Entity

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name of the organization Adventist Health System/St	unbelt, Inc.	59-1479	
Unrelated Business Activity Code (see instructions) Describe the unrelated trade or business Real Proper	ty Pontal		
Part If Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales		se -	-
b Less returns and allowances c Balance 10			· ·
2 Cost of goods sold (Schedule A, line 7) 2			1
3 Gross profit Subtract line 2 from line 1c 3			
4a Capital gain net income (attach Schedule D) 4a	†	i	-
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		·	
c Capital loss deduction for trusts		1	
5 Income (loss) from a partnership or an S corporation (attach		•	
statement) 5		_	f
6 Rent income (Schedule C) 6	100,596.		100,596
7 Unrelated debt-financed income (Schedule E) 7	100,350.	· · · · · · · · · · · · · · · · · · ·	100,330
8 Interest, annuities, royalties, and rents from a controlled	<u> </u>		
organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17)			-
			ł
organization (Schedule G)			-
Exploited exempt activity income (Schedule I)	<u> </u>		
Advertising income (Schedule J) 11		- -	1
2 Other income (See instructions; attach schedule) 12 3 Total. Combine lines 3 through 12 13	2 2 2 2 2 2		100,596
Part II Deductions Not Taken Elsewhere (See instructions directly connected with the unrelated business incom	tor limitations on dec ie.)	ductions.) (Deduct	ions must be
4 Compensation of officers, directors, and trustees (Schedule K)		14	
5 Salaries and wages		15	
6 Repairs and maintenance		16	
7 Bad debts		17	
8 Interest (attach schedule) (see instructions)		18	
9 Taxes and licenses		19	
O Depreciation (attach Form 4562)	20		
Less depreciation claimed on Schedule A and elsewhere on return	21a	211	7
2 Depletion	<u></u>	22	
3 Contributions to deferred compensation plans		23	
4 Employee benefit programs		24	
5 Excess exempt expenses (Schedule I)		25	T
6 Excess readership costs (Schedule J)		26	
7 Other deductions (attach schedule)		27	
B Total deductions. Add lines 14 through 27	•	28	0
Unrelated business taxable income before net operating loss deduction	Cultivate line 00 from line		100,596
2 3.2.35 Sources taxable triberine before the operating loss deduction		10 129	1
Deduction for net operating loss arising in the years beginning an arise			
 Deduction for net operating loss arising in tax years beginning on or after instructions) 			
Deduction for net operating loss arising in tax years beginning on or afte instructions) Unrelated business taxable income. Subtract line 30 from line 29		30 31	100,596

Schedule M (Form 990-T) 2019

Page

Adventist	Health	System/	Sunbelt, Inc.	5	9-1479658	
Schedule A - Cost of Good	is Sold. Enter	method of inve	ntory valuation	<u> </u>		
1 Inventory at beginning of year	1-1-		6 Inventory at end of ye		6.	
2 Purchases	2		7 Cost of goods sold. S		ا ه او	
3 Cost of labor	3		from line 5. Enter here	e and in Part I,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
4a Additional section 263A costs			line 2		7	
(attach schedule)	4a		8 Do the rules of section	n 263A (with respect to)	Yes No
b Other costs (attach schedule)	4b		property produced or	acquired for resale) ap	ply to	
5 Total. Add lines 1 through 4b	5		the organization?			<u> </u>
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Personal Property I	Leased With Re	eal Property)	
Description of property						
(1) Ground Lease						
(2)			 		<u></u>	
(3)				 _		
(4)						
	2. Rent receive	ed or accrued				
(a) From personal property (if the personal property is more 10% but not more than 50%	rcentage of e than	(b) From real of rent for	and personal property (if the percents personal property exceeds 50% or if	age 3(a) Deduc	tions directly connected blumns 2(a) and 2(b) (atta	with the income in ch schedule)
(1)	0.	ule re	ent is based on profit or income) 100,5	96.		0.
(2)						
(3)						
(4)						
Total	0.	Total	100,5	96.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)		100,5	(b) Total dec	on page 1,	0.
Schedule E - Unrelated Del	bt-Financed	Income (see	e instructions)			
			2. Gross income from	t	directly connected with o debt-financed propert	
1. Description of debt-f	inanced property		or allocable to debt- financed property	(a) Straight line dep (attach sched	reciation (I lule)) Other deductions (attach schedule)
(1)						
(2)						
(3)						
(4)					_	
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis llocable to nced property schedule)	6. Column 4 divided by column 5	7. Gross incor reportable (colu 2 x column 6	ımn (coli	Allocable deductions umn 6 x total of columns 3(a) and 3(b))
(1)	 		%			
(2)			%			
(3)			%			
(4)			%			
				Enter here and on p		r here and on page 1,
Tatala				Part I, line 7, colur	mn (A) Par	t I, line 7, column (B)
Totals	neludad in eolumn	0				
Total dividends-received deductions	iciaucu iii coiulliii			·		5

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Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning ______, and ending _____

2019

OMB No 1545-0047

5

Entity

Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990T for instructions and the latest information.
 ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Adventist Health System/Sunbelt, Inc. Unrelated Business Activity Code (see instructions) ► 532000 Describe the unrelated trade or business ► Rental Services Part I. Unrelated Trade or Business Income 1a Gross receipts or sales	59-14	
Describe the unrelated trade or business ▶ Rental Services Part I. Unrelated Trade or Business Income (A) Income 1a Gross receipts or sales 17,200.	1	
Part I. Unrelated Trade or Business Income 1a Gross receipts or sales 17,200.	1	
	(B) Expenses	(C) Net
h Less returns and allowances A Rolonge 4a 17 200		
b Less returns and allowances c Balance ▶ 1c 17,200.	<u> </u>	
2 Cost of goods sold (Schedule A, line 7)		
3 Gross profit Subtract line 2 from line 1c 3 17, 200.		17,200.
4a Capital gain net income (attach Schedule D) . 4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	<u> </u>	
c Capital loss deduction for trusts 4c 4c		
5 Income (loss) from a partnership or an S corporation (attach		İ
statement)		
6 Rent income (Schedule C)		
7 Unrelated debt-financed income (Schedule E) 7		
8 Interest, annuities, royalties, and rents from a controlled		l l
organization (Schedule F)		
9 Investment income of a section 501(c)(7), (9), or (17)		į.
organization (Schedule G)		
10 Exploited exempt activity income (Schedule I)		
11 Advertising income (Schedule J)		
12 Other income (See instructions, attach schedule) 12		
13 Total. Combine lines 3 through 12 13 17, 200.		17,200.
Part II Deductions Not Taken Elsewhere (See instructions for limitations on de directly connected with the unrelated business income.)	eductions.) (Ded	
14 Compensation of officers, directors, and trustees (Schedule K)		14
15 Salaries and wages		15 13,383. 16 117.
16 Repairs and maintenance	··	
17 Bad debts	· · }	17
	· · ·	18 1,025.
Interest (attach schedule) (see instructions)		19 1 1.02.3.
19 Taxes and licenses	·· }	-7
19 Taxes and licenses 20 Depreciation (attach Form 4562)		
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return 21a		21b
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion		21b 22
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans		21b 22 23
Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return Depletion Contributions to deferred compensation plans Employee benefit programs		21b 22 23 24 1,278.
Taxes and licenses 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)		21b 22 23 24 1,278. 25
Taxes and licenses 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)		21b 22 23 24 1,278. 25 26
Taxes and licenses 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) See State		21b 22 23 24 1,278. 25 26 27 4,999.
Taxes and licenses 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 27	cement 7	21b 22 23 24 25 25 26 27 28 20,802-
Taxes and licenses 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 27 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from lines.	cement 7	21b 22 23 24 1,278. 25 26 27 4,999.
Taxes and licenses 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 27	cement 7	21b 22 23 24 25 25 26 27 28 20,802-

Schedule M (Form 990-T) 2019

Adventist	Health	System/S	unbelt, Inc.		59-1479	658		
Schedule A - Cost of Good	S SOIG. Enter	method of inven	tory valuation N/I	<u> </u>		- 		
1 Inventory at beginning of year	1-		6 Inventory at end of ye		1	6		
2 Purchases	2		7 Cost of goods sold. S	Subtract	line 6			
3 Cost of labor	3	_	from line 5. Enter her	e and in	Part I,			
4a Additional section 263A costs			line 2		L	7		
(attach schedule)	4a	·	8 Do the rules of section	n 263A (with respect to	Yes No		
Other costs (attach schedule)	4b		property produced or	acquired	d for resale) apply to	123 25		
5 Total Add lines 1 through 4b	5	D	the organization?		134745 D . 1 D	X		
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	d with Real Prope	rty) 		
1. Description of property								
(1)			· · · · · · · · · · · · · · · · · · ·		·-···			
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accrued			4/ 12 / /			
` rent for personal property is more	rent for personal property is more than or rent for 10% but not more than 50%) the re				and personal property (if the percentage elevations directly connected with the inconstruction of the columns 2(a) and 2(b) (attach schedule) at its based on profit or income)			
(1)								
(2)								
(3)								
(4)								
Total	0.	Total		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	0.		
Schedule E - Unrelated Det	ot-Financed	income (see	instructions)					
			2. Gross income from		cted with or allocable i property			
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)								
(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis illocable to niced property is schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)	_		%					
(2)			%					
(3)			%					
(4)			%					
-					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 .			•	<u></u>	0.	0.		
Total dividends-received deductions in	cluded in column	8				0.		
						Form 990-T (2019)		

Department of the Treasury Internal Revenue Service

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning ______ , and ending

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No 1545-0047

Entity

2019

501(c)(3) Organizations Only

Nam	e of the organization	/ 0	abolt Inc		Employer identific 59-1479		
	Adventist Health System Unrelated Business Activity Code (see instructions) 53200		ibeit, inc.		39-14/3	000	
	Describe the unrelated trade or business Partnersh	ip	- Rental Se	rvi	ces		
	rt [] Unrelated Trade or Business Income		(A) Income		(B) Expenses		(C) Net
1a	Gross receipts or sales			7		7,-	
b	Less returns and allowances c Balance ▶	1c		1 -	<u> </u>		
2	Cost of goods sold (Schedule A, line 7)	2		1		_	
3	Gross profit Subtract line 2 from line 1c	3		- 5			<u>.</u>
4 a	Capital gain net income (attach Schedule D)	4a_				<u> </u>	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		₹	<u> </u>	-]	
С	Capital loss deduction for trusts	4c		[-	
5	Income (loss) from a partnership or an S corporation (attach			1		5	
	statement) Statement 8	5	13,730	سا ((. *	_'.	13,730.
6	Rent income (Schedule C)	6					
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled				-		
	organization (Schedule F)	8				j	
9	Investment income of a section 501(c)(7), (9), or (17)					$\neg \vdash$	· -
	organization (Schedule G)	9	:				
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11					
12	Other income (See instructions, attach schedule)	12		7	ا والمنظمين و المنظمين المنظم	-	
13	Total. Combine lines 3 through 12	13	13,730).			13,730.
Pai	directly connected with the unrelated business in			aeauc	tions.) (Deduc	tions	must be
14	Compensation of officers, directors, and trustees (Schedule K)				14	4	
15	Salaries and wages				1	5	
16	Repairs and maintenance		•		10	5	
17	Bad debts				17	7	
18	Interest (attach schedule) (see instructions)		·			B	
19	Taxes and licenses				15		
20	Depreciation (attach Form 4562)		20		į	ξ.	
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21	b	
22	Depletion		•		2	2	
23	Contributions to deferred compensation plans				. 23	3	
24	Employee benefit programs		•		24	1	
25	Excess exempt expenses (Schedule I)				25	5	
26	Excess readership costs (Schedule J)				20	3	
27	Other deductions (attach schedule)				27	7	
28	Total deductions. Add lines 14 through 27					3	0.
29	Unrelated business taxable income before net operating loss deduc	ction. S	Subtract line 28 from l	ine 13	2		13,730.
30	Deduction for net operating loss arising in tax years beginning on o	r after	January 1, 2018 (see		, .	_]	
	instructions)				30		0.
31	Unrelated business taxable income Subtract line 30 from line 29				31		13,730.
LHA	For Paperwork Reduction Act Notice, see instructions.				Sched	iule M	(Form 990-T) 2019

Unrelated Business Taxable Income from an Unrelated Trade or Business

Entity

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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Open to Public Inspection for 501(c)(3) Organizations Only

OMB No 1545-0047

Nam	Adventist Health System	ı/Sw	nbelt, Inc.	Employer identification i	
	Unrelated Business Activity Code (see instructions) ▶ 53242				
			perty Rental		
Pa	rt I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales				
b	Less returns and allowances c Balance >	1 <u>c</u>			
2	Cost of goods sold (Schedule A, line 7)	2			
3	Gross profit Subtract line 2 from line 1c	3			
4 a	Capital gain net income (attach Schedule D)	4a			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b			
С	Capital loss deduction for trusts	4c			
5	Income (loss) from a partnership or an S corporation (attach				
	statement)	5			
6	Rent income (Schedule C)	6	105,840.	53,114.	52,726.
7	Unrelated debt-financed income (Schedule E)	7			
8	Interest, annuities, royalties, and rents from a controlled				
	organization (Schedule F)	8			
9	Investment income of a section 501(c)(7), (9), or (17)				
	organization (Schedule G)	9			
10	Explorted exempt activity income (Schedule I)	10			
11	Advertising income (Schedule J)	11			
12	Other income (See instructions, attach schedule)	12		.	
13	Total. Combine lines 3 through 12	13	105,840.	53,114.	52,726.
14	directly connected with the unrelated business in Compensation of officers, directors, and trustees (Schedule K)				
15	Salaries and wages	•	•	14	
16	Repairs and maintenance	-	•	16	
17	Bad debts			17	
18	Interest (attach schedule) (see instructions)			18	
19	Taxes and licenses	-	•	19	
20	Depreciation (attach Form 4562)	•	20	19	
21	Less depreciation claimed on Schedule A and elsewhere on return	•	21a	21b	
22	Depletion		[Zia]	22	
23	Contributions to deferred compensation plans		• •	23	
24	Employee benefit programs		• •	24	
25	Excess exempt expenses (Schedule I)	•	• • •	25	
26	Excess readership costs (Schedule J)	•	••	26	
27	Other deductions (attach schedule)		•	27	
28	Total deductions. Add lines 14 through 27			28	0.
29	Unrelated business taxable income before net operating loss deductions.	ction S			52,726.
30	Deduction for net operating loss arising in tax years beginning on o				32,7200
	instructions)	. 4.10.1	January 1, 2010 (366	30	0.
31	Unrelated business taxable income_Subtract line 30 from line 29			31	52,726.
	For Paperwork Reduction Act Notice, see instructions.			···	(Form 990-T) 2019

F 000 T (0040)						Enercy ,		
Form 990-T (2019) Adventist	- Health	System/S	unbelt, Inc.		59-147	Page		
Schedule A - Cost of Good	Is Sold. Enter	method of inven	ntory valuation		33-147	9030		
1 Inventory at beginning of year	11		6 Inventory at end of	/ear		6		
2 Purchases	2		7 Cost of goods sold.	•	ine 6	Ç-₹3		
3 Cost of labor	3		from line 5. Enter he		•	1.0		
4a Additional section 263A costs	<u> </u>		line 2		u,	7		
(attach schedule)	4a		8 Do the rules of secti	on 263A (v	with respect to	Yes No		
b Other costs (attach schedule)	4b		property produced o	•	•	10 - 2		
5 Total. Add lines 1 through 4b	5		the organization?		, -pp.,	<u> </u>		
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	d With Real Prop	erty)		
Description of property								
(1) Timeshare Rent								
② Select Specialty								
(3) San Marcos M.R.I	., LP -	Lease of	Equipment					
(4)				-				
	2. Rent receiv	ed or accrued			2/->2			
rent for personal property is more than of rent f 10% but not more than 50%) the			nt for personal property exceeds 50% or if			directly connected with the income in is 2(a) and 2(b) (attach schedule) Statement 19		
(1)	41,549.				10,802.			
(2)	46,484.	0.				29,829.		
(3)	0.		17,	807.		12,483.		
(4)			<u> </u>					
Total	88,033.	Total	17,	807.		······································		
c) Total income. Add totals of columns here and on page 1, Part I, line 6, colum	n (A)		105,		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	▶ 53,114.		
Schedule E - Unrelated Deb	ot-Financed	Income (see	instructions)					
			2. Gross income from		3. Deductions directly confito debt-finance			
1. Description of debt-fi	nanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
(1)								
(2)								
(3)								
(4)	-							
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis illocable to iced property schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)			%					
(2)			- %					
(3)			%	1				
(4)			%					
					ter here and on page 1, art I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)		

Totals

Total dividends-received deductions included in column 8

;

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

OMB No 1545-0047

Entity

Department of the Treasury Internal Revenue Service

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name	of the organization Adventist Health System	/ C117	abelt Ind	Employer id	entificatio 47965	
_	Unrelated Business Activity Code (see instructions) ► 54170		ibert, inc.	1 33-1	1 //	
	Describe the unrelated trade or business Research		vices			
	t I' Unrelated Trade or Business Income		(A) Income	(B) Expens	ies	(C) Net
1a	Gross receipts or sales 22,120.					
Þ	Less returns and allowances c Balance >	1c	22,120.			<u> </u>
2	Cost of goods sold (Schedule A, line 7)	2		· · · · · · · · ·		
3	Gross profit Subtract line 2 from line 1c	3_	22,120.			22,120.
4 a	, , , , , , , , , , , , , , , , , , , ,	4a				
	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b	-			
C	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach]]	
	statement)	5				
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled				1	
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)				J	
	organization (Schedule G)	9			i	
10	Explorted exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12	00.100	#- / r		-00 100
<u>13</u>	Total. Combine lines 3 through 12	13	22,120.			22,120.
Par	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in			uctions.) (De	eduction	is must be
14	Compensation of officers, directors, and trustees (Schedule K)	_			14	
15	Salaries and wages				15	25,507.
16	Repairs and maintenance		•	••	16	
17	Bad debts	•	• •	••••	17	
18	Interest (attach schedule) (see instructions)		•		18	
19	Taxes and licenses				19	
20	Depreciation (attach Form 4562)		20			
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	
22	Depletion	_			22	
23	Contributions to deferred compensation plans				23	
24	Employee benefit programs				24	7,652.
25	Excess exempt expenses (Schedule I)				25	<u>-</u>
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)				27	
28	Total deductions. Add lines 14 through 27		••	•	28	33,159.
29	Unrelated business taxable income before net operating loss deduc	tion S	Subtract line 28 from line 1	3	29	-11,039.
30	Deduction for net operating loss arising in tax years beginning on or					
	instructions)		•		30	0.
31 _	Unrelated business taxable income Subtract line 30 from line 29			·	31	$-\overline{11,039}$.
	For Panerwork Reduction Act Notice see instructions					M (Form 990-T) 2019

Form 990-T (2019)

Form 990-T (2019)											Page
Adventis	t Health	Syste	m/Sur	nbe:	1t,	Inc.		<u> 59-14</u>	<u> 7965</u>	58	
Schedule A - Cost of Good	ds Sold. Ente	r method o	finventor	y valu	ation	N/A	<u> </u>				
1 Inventory at beginning of year	1 1			6 In	entory a	at end of yea	ar		6		
2 Purchases	2			7 C	ost of go	ods sold. S	ubtract	line 6	5		
3 Cost of labor .	3			fr	om line 5	. Enter here	and in	Part I,		_	
4a Additional section 263A costs	1 1		ĺ	ļır	ne 2				L	<u> </u>	
(attach schedule)	4a			8 D	o the rule	s of section	263A (with respect to		[7	es No
b Other costs (attach schedule)	4b			pr	roperty p	roduced or a	acquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5				e organiz						X
Schedule C - Rent Income	(From Real	Property	and Pe	erso	nal Pr	operty L	.ease	d With Real Pro	perty	<i>(</i>)	
(see instructions)		_									
1. Description of property											
(1) \										<u></u>	<u>, </u>
(2)											
_(3)											
(4)											
	••	ed or accrued						3(a) Deductions direc	thy conne	acted with the incor	ma in
(a) From personal property (if the property can for personal property is monomore than 50% but not more than 50%.	 (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) 				3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)						
(1)											
(2)											
(3)						•					
(4)											
Total	0.	Total					0.			•	
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, columns		iter 🛌					0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)			0.
Schedule E - Unrelated De		Income	(see inst	tructio	ns)			<u>, , ,</u>			
				2. G	ross incom	ie from		3. Deductions directly co			
Description of debt-	inanced property				illocable to sanced pro		(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach sched	
(1)						-			+		
(2)									$\neg \vdash$		
(3)									\top		
(4)						•					
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis illocable to nced property i schedule)	•		olumn 4 dr by column			7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
(1)						%			\neg		
(2)			Ì			%					
(3)				•••	_	%			\neg		
(4)						%			\neg		
			-					nter here and on page 1, art I, line 7, column (A)	\top	Enter here and on part I, line 7, colur	
Totals						▶		C).		0.

Total dividends-received deductions included in column 8

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

Entity

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

Name of the organization Adventist Health System/S				Employer id		
Unrelated Business Activity Code (see instructions) > 541900						
Describe the unrelated trade or business Technical (Consult	ing Se	rvic	es		
Part 13 Unrelated Trade or Business Income	(A)	Income		(B) Expens	es	(C) Net
1a Gross receipts or sales 82,785.			1,			
b Less returns and allowances c Balance ▶ 1	ıc İ	82,785	i . ?		. [_
2 Cost of goods sold (Schedule A, line 7)	2					
3 Gross profit Subtract line 2 from line 1c	3	82,785		4.0	1	82,785.
4a Capital gain net income (attach Schedule D)	la		1.			
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	Ь		1.			
	ic		1		T I	
5 Income (loss) from a partnership or an S corporation (attach			1.			
statement)	5		- []		- · [
6 Rent income (Schedule C)	6					
7 Unrelated debt-financed income (Schedule E)	7					
8 Interest, annuities, royalties, and rents from a controlled						
organization (Schedule F)	В				1	
9 Investment income of a section 501(c)(7), (9), or (17)						
organization (Schedule G)	9		İ			
10 Exploited exempt activity income (Schedule I)	0					
11 Advertising income (Schedule J)	1					
12 Other income (See instructions, attach schedule)	2		<u>i</u>	* ·		
13 Total. Combine lines 3 through 12	3	82,785				82,785.
Part II. Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business incompared to the connected with the connec	me.)					
14 Compensation of officers, directors, and trustees (Schedule K)	•				14	22 501
15 Salaries and wages	•			•	15	33,501.
16 Repairs and maintenance					16	
17 Bad debts	•				17	
18 Interest (attach schedule) (see instructions)		•	-	• • • •	18	
• • • • • • • • • • • • • • • • • • • •		1 1			19	
, , , , , , , , , , , , , , , , , , , ,	-	20			1	
Less depreciation claimed on Schedule A and elsewhere on return Depletion		21a			21b	
22 Contributions to deferred compensation plans	• •	••			22	
24 Employee benefit programs		•	•	•	23	9,962.
	-			-	24	3,302.
·		•			25	
26 Excess readership costs (Schedule J) 27 Other deductions (attach schedule)	••			-	26	·
28 Total deductions. Add lines 14 through 27				-	27	43,463.
29 Unrelated business taxable income before net operating loss deduction	 n. Subtract lin	a 28 from l	 no 13		28	39,322.
30 Deduction for net operating loss ansing in tax years beginning on or aff			115 13		29	33,344.
instructions)	ici January I,	ZUTO (SEE			100	0.
31 Unrelated business taxable income Subtract line 30 from line 29	•		-		30	39,322.
LHA For Paperwork Reduction Act Notice, see instructions.			•			M (Form 990-T) 2019

Form 990-T (2019) Adventist	- Weelth	System/S	unbolt Ind		FO 147	Entity	9 Page 3
Schedule A - Cost of Good	s Sold. Ente	system/s	sunbelt, Inc. ntory valuation ► N/A		59-147	9638	
1 Inventory at beginning of year 2 Purchases 3 Cost of labor 4 a Additional section 263A costs (attach schedule) b Other costs (attach schedule) 5 Total. Add lines 1 through 4b Schedule C - Rent Income (see instructions)	1 2 3 4a 4b 5	(6 Inventory at end of ye 7 Cost of goods sold. S from line 5. Enter here line 2 8 Do the rules of section property produced or the organization?	ar Subtract e and in the 1 263A (acquired	Part I, with respect to I for resale) apply to]	Yes No
. Description of property							
(1) (2) (3) (4)				-			
	2. Rentreceiv	ed or accrued		-			
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	and personal property (if the percentage personal property exceeds 50% or if int is based on profit or income)			y connected with the inco ind 2(b) (attach schedule)	ome in		
<u>(1)</u> (2)		<u> </u>					-
(3)		<u> </u>				-	
(4)							
Total	0.	Total		0.	-		
c) Total income. Add totals of columns ere and on page 1, Part I, line 6, colum Schedule E - Unrelated Det	n (A)	>		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	-	0.
oncome E - Officialed Del	Je manceu	income (see	instructions)	· · ·	3 Deductions directly con-	nected with or alloceble	
1. Description of debt-fit	nanced property		Gross income from or allocable to debt- financed property	(a)	Deductions directly connected with or allocable to debt-financed property Straight line depreciation (attach schedule) (b) Other deduct (attach schedule)		
(1)	•			—			
2)							
3)							
4)							
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis llocable to nced property schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable de (column 6 x total 3(a) and 3	of columns
1)			%				
	I					T	

Form 990-T (2019)

0.

Enter here and on page 1, Part I, line 7, column (B).

(3)

(4)

Totais

%

%

Total dividends-received deductions included in column 8

Enter here and on page 1, Part I, line 7, column (A)

0.

Unrelated Business Taxable Income from an Unrelated Trade or Business

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

For calendar year 2019 or other tax year beginning and ending

| 2019

Entity

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990T for instructions and the latest information.

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OMB No 1545-0047

10

Employer identification number Name of the organization Adventist Health System/Sunbelt, Inc. 59-1479658 Unrelated Business Activity Code (see instructions) 561000 Describe the unrelated trade or business Administrative Services Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net 319,939 1a Gross receipts or sales 319,939. c Balance ▶ **b** Less returns and allowances 10 2 Cost of goods sold (Schedule A, line 7) 2 319,939. 319,939. 3 Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a **b** Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b c Capital loss deduction for trusts 4c 5 Income (loss) from a partnership or an S corporation (attach statement) 5 Rent income (Schedule C) 6 7 Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) 8 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 11 12 Other income (See instructions, attach schedule) 12 Total. Combine lines 3 through 12 319,939. 319,939. 13 13

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Deductions must be directly connected with the unrelated business income.)

			_			
14	Compensation of officers, directors, and trustees (Schedule K)			4	14	
15	Salaries and wages				15	7,440.
16	Repairs and maintenance				16	
17	Bad debts .				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses				19	569.
20	Depreciation (attach Form 4562)	2	o]			
21	Less depreciation claimed on Schedule A and elsewhere on return	21	la		21b	
22	Depletion				22	
23	Contributions to deferred compensation plans				23	
24	Employee benefit programs				24	1,042.
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)	See	S	tatement 9	27	257,322
28	Total deductions. Add lines 14 through 27				28	266,373.
29	Unrelated business taxable income before net operating loss deduction. Subtract	line 28	fro	m line 13	29	53,566.
30	Deduction for net operating loss arising in tax years beginning on or after January	1, 201	8 (s	ee		
	instructions)				30	0.
31	Unrelated business taxable income. Subtract line 30 from line 29				31	53,566.

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

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Form 990-T (2019) Adventist	t Health S	vstem/Sun	belt. Inc.		59-1479	1658	Page	
Schedule A - Cost of Good	ds Sold. Enter me	ethod of inventory	valuation N/A		33 1173			
1 Inventory at beginning of year	1		6 Inventory at end of ve			6		
2 Purchases	2		7 Cost of goods sold. S		ine 6			
3 Cost of labor	3		from line 5. Enter here		P.	· [
4 a Additional section 263A costs			line 2		"", F	7		
(attach schedule)	4a	i,	B Do the rules of section	1 263A (1	with respect to	Ye	es No	
b Other costs (attach schedule)	4b		property produced or		•	T	1-	
5 Total. Add lines 1 through 4b	5		the organization?		. rat rooms, apply to		X	
Schedule C - Rent Income (see instructions)	(From Real Pro	operty and Pe	rsonal Property l	ease	d With Real Prope	erty)		
Description of property						•		
(1)			-					
(2)			. ~	_	-		-	
(3)						<u> </u>		
(4)								
	2. Rent received or	accrued						
rent for personal property is mor	(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) (b) From real a of rent for personal property is more than 50% the rent for personal property is more than 50%.				3(a) Deductions directly of columns 2(a) and	connected with the income i 2(b) (attach schedule)	nı e	
(1)				-				
(2)								
(3)							_	
(4)		-	· · · · · · · · · · · · · · · · · · ·					
Total	0 · To	tal		0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, colum Schedule E - Unrelated Del	ın (A)	Come (see set	ection of	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>	0.	
Concadie E - Oni elated Del	Dt-I manced in	come (see instri	uctions)	1	2 Dodustens dreeth seems			
		į,	2. Gross income from			ductions directly connected with or allocable to debt-financed property		
Description of debt-fit	inanced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)		
(1)								
(2)								
(3)								
(4)	-							
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	5. Average adju of or alloca debt-financed (attach sch	ble to property	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable dedu (column 6 x total of a 3(a) and 3(b)	columns	
(1)			%					
(2)			%					
(3)			%					
(4)			%					
			, , , , , , , , , , , , , , , , , , ,		ter here and on page 1, art I, line 7, column (A)	Enter here and on pa Part I, line 7, columi		
Totals .			▶		0.		0.	
Total dividends-received deductions in	ncluded in column 8				•		0.	
						Form 990-		

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Entity OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	Adventist Health System	/Sur	belt, Inc.	59-14	479658	3
	Unrelated Business Activity Code (see instructions) > 56170			<u> </u>	·	
	Describe the unrelated trade or business Property	Mana	agement Serv	vices		
Pa	rt I: Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1a	Gross receipts or sales 90,027.			3°	~- ,	
b		1c	90,027	. [²	_ [
2	Cost of goods sold (Schedule A, line 7)	2			/ .	-
3	Gross profit. Subtract line 2 from line 1c	3	90,027			90,027.
4 a	Capital gain net income (attach Schedule D)	4a			0.11	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		-		
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach					
	statement)	5		ļ. ,. <u>.</u>	•	
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8		<u> </u>		
9	Investment income of a section 501(c)(7), (9), or (17)	П				<u> </u>
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12		A COLUMN AND ADMINISTRATION OF THE PARTY OF		
13	Total, Combine lines 3 through 12	13	90,027.	,		90,027.
<u>Pai</u>	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business in Compensation of officers, directors, and trustees (Schedule K)			eductions.) (De	ductions	s must be
15	Salaries and wages	• • •	• • •		15	15,490.
16	Repairs and maintenance	••	• •		16	20, 2300
17	Bad debts	•			17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses	•		-	19	 -
20	Depreciation (attach Form 4562)		20	•••		
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	
22	Depletion				22	
23	Contributions to deferred compensation plans		•	• •	23	· · · · · · · · · · · · · · · · · · ·
24	Employee benefit programs			•	24	3,651.
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)			• • • • •	26	
27	Other deductions (attach schedule)		See Stat	tement 10	27	7,790.
28	Total deductions. Add lines 14 through 27				28	26,931.
29	Unrelated business taxable income before net operating loss deduc	tion S	ubtract line 28 from lin	e 13	29	63,096.
30	Deduction for net operating loss arising in tax years beginning on or	r after .	lanuary 1, 2018 (see			
	instructions)			_	30	0.
<u>31</u>	Unrelated business taxable income Subtract line 30 from line 29		1111		31	63,096.
LHA	For Paperwork Reduction Act Notice, see instructions.			S	chedule M	(Form 990-T) 2019

Schedule A - Cost of Good	e Sold Ento	System/S	tory valuation ► N/	2	59-1479	030
	1 4 T	THEIRIOG OF INVE	T		т	
 Inventory at beginning of year Purchases 	2		6 Inventory at end of y			6
3 Cost of labor	3		7 Cost of goods sold. from line 5. Enter he		B.	2
4a Additional section 263A costs	· -		line 2	re and m	raili,	` _
(attach schedule)	4a		8 Do the rules of section	nn 262A /	L.	Yes
b Other costs (attach schedule)	4b		property produced of	•		163
5 Total. Add lines 1 through 4b	5		the organization?	acquiret	Tiol resale) apply to	
Schedule C - Rent Income (see instructions)	(From Real	Property and	Personal Property	Lease	d With Real Prope	rty)
Description of property						
(1)						
(2)						
(3)						-
(4)						
		ed or accrued			0(0) Doduction describes	
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	` of rent for p	nd personal property (if the percentersonal property exceeds 50% or if it is based on profit or income)	tage f	columns 2(a) and	onnected with the income in 2(b) (attach schedule)
(1)						
(2)						
(3)	-					
(4)						
Total	0.	Total		0.		
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, colum	n (A)	>		0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	•
Schedule E - Unrelated Del	bt-Financed	Income (see	instructions)			
			Gross income from or allocable to debt-		Deductions directly connect to debt-financed	
Description of debt-fi	inanced property		financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				 		
(2)				1		
(3)						
(4)				1		
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis flocable to need property ischedule)	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))
(1)			%			
(2)			%			
(2)			%			
(9)						
(4)			%			
			<u> </u>		nter here and on page 1, art I, line 7, column (A)	Enter here and on page 1 Part I, line 7, column (B)
			<u>%</u>			, ,

Department of the Treasury Internal Revenue Service

Unrelated Business Taxable Income from an

Unrelated Trade or Business

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

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No 1545-0047

Entity

intern	al Hevenue Service Do not enter SSN numbers on this form as i	t may b	e made publ	ic if your orga	inization is a	501(c)(3).	501(c)(3) Organizations Only
Name	e of the organization Adventist Health System	/Su	nbelt.	Inc.		oyer identificati 9 – 1 4 7 9 6	
	Unrelated Business Activity Code (see instructions) 61143		.				
	Describe the unrelated trade or business Education		Servic	es			
	rt] Unrelated Trade or Business Income			ncome	(B) E	xpenses	(C) Net
1a	Gross receipts or sales 3,918,227.	1			E Free	£	5
	Less returns and allowances c Balance	10	3.91	8,227.	20		A The Course
2	Cost of goods sold (Schedule A, line 7)	2	<u> </u>	- · · · · · · · · · · · · · · · · · · ·	2 1 2 2 2 2 2		
3	Gross profit Subtract line 2 from line 1c	3	3,91	8,227.	Į.,		3,918,227.
4 a	Capital gain net income (attach Schedule D)	4a		.	2777	1	,
b		4b			C		
С	Capital loss deduction for trusts	4c			! - 12		
5	Income (loss) from a partnership or an S corporation (attach				?	_	
	statement)	5			1		
6	Rent income (Schedule C)	6		•			
7	Unrelated debt-financed income (Schedule E)	7					
8	Interest, annuities, royalties, and rents from a controlled						
	organization (Schedule F)	8					
9	Investment income of a section 501(c)(7), (9), or (17)						
	organization (Schedule G)	9			ı	`	1
10	Exploited exempt activity income (Schedule I)	10					
11	Advertising income (Schedule J)	11					
12	Other income (See instructions, attach schedule)	12			4v	- Total 1	
13	Total. Combine lines 3 through 12	13	3,91	8,227.			3,918,227.
	Deductions Not Taken Elsewhere (See instruct directly connected with the unrelated business in			ons on de	ductions	···	ns must be
14	Compensation of officers, directors, and trustees (Schedule K)	••			• • • • •	14	1 012 606
15	Salaries and wages		•		• •	15	1,913,686.
16	Repairs and maintenance					16	··
17	Bad debts					17	
18	Interest (attach schedule) (see instructions)	•	-			18	
19	Taxes and licenses			ا موا	616,9	66. 72.	
20 21	Depreciation (attach Form 4562) Less depreciation claimed on Schedule A and elsewhere on return		•	20	010,5		616,966.
22	Depletion			21a		21b	010,300.
23	Contributions to deferred compensation plans		•			23	
24	Employee benefit programs				•	23	645,216.
25	Excess exempt expenses (Schedule I)			•	•	25	043,210.
26	Excess readership costs (Schedule J)					26	<u> </u>
27	Other deductions (attach schedule)		Se	e Stat	ement		1,682,344.
	Total deductions. Add lines 14 through 27		٠.	- Juan		28	4,858,212.
	Unrelated business taxable income before net operating loss deduced	tion S	Subtract line	28 from line	13	29	-939,985.
	Deduction for net operating loss arising in tax years beginning on o					77.3	
	instructions)		· · · · · · · · · · · · · · · · ·	,500		30	0.
31	Unrelated business taxable income Subtract line 30 from line 29					31	-939,985.

Form 990-1 (2019)	L 1714h	Great am /	C b	1 L T		FO 147	0.650	Page :
Adventist Schedule A - Cost of Good	e Health	System/	Sunbe	it, inc.	/ 3	59-147	9658	
	1	r method of inve						
1 Inventory at beginning of year	1 1		_	entory at end of	•		6	
2 Purchases	2			ost of goods sold.			2	
3 Cost of labor	3		_	om line 5. Enter h	ere and in	Part I,		
4a Additional section 263A costs			i i	ne 2			7	
(attach schedule)	4a			o the rules of sect	-	•		Yes No
b Other costs (attach schedule)	46		_	• • •	or acquired	f for resale) apply to		3 - ^'\ '
5 Total. Add lines 1 through 4b	(Fram Das)	D		ne organization?		-1 M/4L D 1 D		X
Schedule C - Rent Income (see instructions)	(From Real	Property an	a Perso	nai Property	Lease	a with Real Prop	ertyj	
1. Description of property			-					
(1)								
(2)								
(3)		_						
(4)								
		ed or accrued				0(-) 0 - + - + - + - + - + - + - + - + - + -		
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	` of rent for	personal pro	property (if the perce perty exceeds 50% or in profit or income)	ntage if	3(a) Deductions directly columns 2(a) an	connected with the in d 2(b) (attach schedul	e)
(1)			-					
(2)						<u> </u>		
(3)							 	
(4)	-		_					
Total	0.	Total			0.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, columns		ter			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	_	0.
Schedule E - Unrelated Del		Income (see	e instructio	ons)	<u> </u>	r arti, iine o, column (a)		<u> </u>
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ross income from		3. Deductions directly conn to debt-finance		e C
1. Description of debt-fi	inanced property		ora	allocable to debt- nanced property	(a)	Straight line depreciation (attach schedule)	(b) Other de (attach sch	
(1)			-				<u> </u>	
(1)	· · · · · · · · · · · · · · · · · · ·		+				-	
(3)			+		-		-	
(4)			+		+	·		
4. Amount of average acquisition	5 0,,,,,,	adjusted basis	+		 	7.0	2	
a. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis illocable to nced property schedule)		column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8 Allocable (column 6 x tota 3(a) and	al of columns
(1)				%				
(2)				%				
(3)				%				
(4)				%				
						nter here and on page 1, lart I, line 7, column (A)	Enter here and Part I, line 7, c	
Totals				b	▶	0.		0.

Total dividends-received deductions included in column 8

Unrelated Business Taxable Income from an

Unrelated Trade or Business

OMB No 1545-0047

Entity

13

Department of the Treasury Internal Revenue Service

For calendar year 2019 or other tax year beginning ► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Unrelated Business Activity Code (see instructions) Partnership Fitness Center Part Unrelated Trade or Business Partnership Fitness Center	IVAIII	Adventist Health System	/Sw	nbelt, Inc		59-14		
Describe the unrelated trade or business Partnership - Fitness Center Part I Unrelated Trade or Business Income	$\overline{}$							
Part I Unrelated Trade or Business Income			ip	- Fitness	Cente	er		
b Less returns and allowances	P.a						es	(C) Net
2 Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 4 Copting ann et income (fattach Schedule D) 4 A Capital gain net income (fattach Schedule D) 4 A Capital gain net income (fattach Schedule D) 4 A Capital gain net income (fattach Schedule D) 4 A Capital gain net income (fattach Schedule D) 5 Net gain (joss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an Scorporation (attach statement) Statement 12 5 -939,995. 6 Rent income (Schedule C) 6 Rent income (Schedule C) 7 Unrelated debt financed income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule F) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Ofter income (Schedule J) 13 Total. Combine lines 3 through 12 14 Compensation of officers (directors) 15 Salaries and wages 16 Repairs and maintenance 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and (locance) 19 Depreciation (attach Form 4562) 11 Less depreciation claimed on Schedule A and elsewhere on return 19 Deptetion 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 21 Deptetion 22 Contributions to deferred compensation plans 23 Excess readership costs (Schedule I) 24 Exployee benefit programs 24 Employee benefit programs 25 Excess readership costs (Schedule I) 26 Excess readership costs (Schedule I) 27 Ofter deductions, add (lates 14 through 27 29 Urrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 -939,995.	1 a	Gross receipts or sales			•			
3 Gross profit Subtract line 2 from line 1c 4 a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, III in 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 6 Rent income (Schedule C) 7 Unrelated debt financed income (Schedule B) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income). 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salares and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 Taxes and licenses 19 Taxes and licenses 19 Taxes and licenses 19 Taxes and licenses 19 Taxes and licenses 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 21 Depletion 22 Contributions to deferred compensation plans 23 Excess readership costs (Schedule I) 24 Employee benefit programs 24 Employee benefit programs 25 Excess readership costs (Schedule I) 26 Excess readership costs (Schedule I) 27 Total deductions, Add lines 14 through 27 28 Urrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 O-339,995.	b	Less returns and allowances c Balance ▶	1c					
4a Capital gain net income (attach Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 5 Rent income (Schedule C) 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annutites, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule I) 12 Other income (Se instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 16 Repairs and maintenance 17 Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess readership costs (Schedule I) 26 Excess readership costs (Schedule I) 27 Other deductions. Adv through 27 28 Other deductions, askapie income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions) Stimt 1 3 30 O .	2	Cost of goods sold (Schedule A, line 7)	2		۳-			ar
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 7 Interest, annuties, royatties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and maintenance 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 19 Taxes and incenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depletion 22 Contributions to deferred compensation plans 23 Excess readership costs (Schedule I) 25 Excess readership costs (Schedule I) 26 Excess readership costs (Schedule I) 27 Other deductions Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 —939,995.	3	Gross profit Subtract line 2 from line 1c	3			•-		
c Capital loss deduction for trusts 5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 6 Rent income (Schedule C) 7 Unrelated debt-financed income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (Schedule J) 13 Total, Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and incenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess readership costs (Schedule J) 26 Excess readership costs (Schedule J) 27 Total deductions. Add lines 14 through 27 28 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions) Stimt 13 30 O .	4 a	Capital gain net income (attach Schedule D)	_4a					
5 Income (loss) from a partnership or an S corporation (attach statement) Statement 12 5	b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b					
statement) Statement 12	С	Capital loss deduction for trusts	4c					
6 Rent income (Schedule C) 7 Unrelated debt financed income (Schedule E) 8 Interest, annuties, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Complete lines 3 through 12 15 Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salanes and wages 16 Repairs and maintenance 17 Bad debts 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 Depletion 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depletion 23 Contributions to deferred compensation plans 24 Employee benefit programs 24 Employee benefit programs 25 Excess exempt expenses (Schedule I) 26 Excess readership costs (Schedule I) 27 Other deductions, Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions) 25 Ext. 13 30 O.	5	Income (loss) from a partnership or an S corporation (attach			17			
The Interest, annuities, royalties, and rents from a controlled organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) Exploited exempt activity income (Schedule I) Advertising income (Schedule J) Total, Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) Compensation of officers, directors, and trustees (Schedule K) Salanes and wages Compensation of officers, directors, and trustees (Schedule K) Salanes and wages Repairs and maintenance In the Interest (attach schedule) (see instructions) Interest (attach schedule) (see instructions) Experimental organization (attach Form 4562) Depreciation (attach Form 4562) Less depreciation (attach Form 4562) Employee benefit programs Employee benefit programs Employee benefit programs Employee benefit programs Employee benefit programs Additional contributions to deferred compensation plans Employee benefit programs Employee benefit programs Additional contributions (attach schedule) Excess readership costs (Schedule I) Total deductions, Add lines 14 through 27 Total deductions, Add lines 14 through 27 Under deductions (attach schedule) Total deductions, and the program or after January 1, 2018 (see instructions) In the program or and program or after January 1, 2018 (see instructions) St. total deductions (attach schedule) In the program or after January 1, 2018 (see instructions) In the program or after January 1, 2018 (see instructions)		statement) Statement 12	5	-939,99	95.			-939,995.
8 Interest, annurties, royalties, and rents from a controlled organization (Schedule F) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total, Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salaries and wages 16 Repairs and maintenance 16 Bad debts 17 Bad debts 17 Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 22 Depiction 22 Depiction 22 Contributions to deferred compensation plans 23 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess exempt expenses (Schedule J) 26 Excess readership costs (Schedule J) 27 Other deductions, (attach schedule) 28 Total deductions, Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 29 -939,995.	6	Rent income (Schedule C)	6					
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9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 13 Total. Combine lines 3 through 12 14 Compensation of officers, directors, and trustees (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 Compensation of officers, directors, and trustees (Schedule K) 15 Salanes and wages 16 Repairs and maintenance 18 Hespairs and maintenance 19 Taxes and licenses 19 Taxes and licenses 19 Depreciation (attach Form 4562) 20 Less depreciation claimed on Schedule A and elsewhere on return 20 Depreciation (attach Form 4562) 21 Less depreciation claimed on Schedule A and elsewhere on return 21 Employee benefit programs 22 Contributions to deferred compensation plans 23 Contributions to deferred compensation plans 24 Employee benefit programs 25 Excess exempt expenses (Schedule J) 26 Excess readership costs (Schedule J) 27 Other deductions, Add lines 14 through 27 28 Total deductions. Add lines 14 through 27 29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 20 Deduction of right plans are supplied to the plans are supplied	8	Interest, annuities, royalties, and rents from a controlled	į į		İ			
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29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions) Stmt 13 30 0.				•		•		
Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see instructions) Stmt 13 30 0.		•		N h	1 45			
(instructions) Stmt 13 30 0.							29	-333,335.
			arter .	January 1, 2018 (se		Ctmt 12		^
		•			'	SCHIC IS		_030 005

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

Unrelated Business Taxable Income from an Unrelated Trade or Business

OMB No 1545-0047

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pen to Public Inspection fo

Department of the Treasury Internal Revenue Service Open to Public Inspection for 501(c)(3). 501(c)(3) Organizations Only

Entity

IVaille	Adventist Health System	/Sunb	elt. Inc.	59-14		
$\overline{}$	Jurelated Business Activity Code (see instructions) ► 72232		<u> </u>			
	Describe the unrelated trade or business Catering					
Pa	TIE Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1 a	Gross receipts or sales 427,080.			L 3" " 3	•	w √ - -
b	Less returns and allowances c Balance	1c	427,080			
2	Cost of goods sold (Schedule A, line 7)	2				1
3	Gross profit. Subtract line 2 from line 1c	3	427,080			427,080.
4 a	Capital gain net income (attach Schedule D)	4a		1		
ь	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		E. 1	*	
С	Capital loss deduction for trusts	4c		U		
5	Income (loss) from a partnership or an S corporation (attach			1		· · · · · · · · · · · · · · · · · · ·
	statement)	5		<u> </u>		
6	Rent income (Schedule C)	6				
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8		1		
9	Investment income of a section 501(c)(7), (9), or (17)		-			
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12				
13	Total, Combine lines 3 through 12	13	427,080.		l	427,080.
14	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business incompensation of officers, directors, and trustees (Schedule K)	come.)			14	
	Salaries and wages	,		• •	15	169,071.
16	Repairs and maintenance		•••		16	
17	Bad debts	•		• •	17	· · · · · · · · · · · · · · · · · · ·
18	Interest (attach schedule) (see instructions)	•	•		18	
19	Taxes and licenses			•	19	
20	Depreciation (attach Form 4562)		20	• •	3.1	
21	Less depreciation claimed on Schedule A and elsewhere on return		21a		21b	•
22	Depletion				22	-
23	Contributions to deferred compensation plans				23	
24	Employee benefit programs			_	24	79,167.
25	Excess exempt expenses (Schedule I)				25	
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)		See Stat	ement 14	27	120,632.
	Total deductions. Add lines 14 through 27				28	368,870.
29	Unrelated business taxable income before net operating loss deduc	tion Sub	tract line 28 from line	e 13	29	58,210.
10	Deduction for net operating loss arising in tax years beginning on or	after Jan	uary 1, 2018 (see	_	us _1	
	instructions)			Stmt 15	30	32,518.
	Unrelated business taxable income Subtract line 30 from line 29				31	25,692.
.HA	For Paperwork Reduction Act Notice, see instructions.			Sc	hedule	M (Form 990-T) 2019

Farm 000 T (0010)							Encicy	7.4
Form 990-T (2019) Adventist	Health	System/S	unb	elt, Inc.		59-1479	9658	Page 3
Schedule A - Cost of Good	s Sold. Enter	method of inven	tory v	aluation N/A	<u> </u>	33 1473	,,,,,	
1 Inventory at beginning of year	1		$\overline{}$	Inventory at end of ye	ar		6	
2 Purchases	2		7	Cost of goods sold. S		line 6	. •	
3 Cost of labor	3		7	from line 5. Enter here		I.		
4a Additional section 263A costs		_	1	line 2		<u> </u>	7	
(attach schedule)	4a		8	Do the rules of section	1 263A (with respect to		Yes No
b Other costs (attach schedule)	4b		1 T	property produced or	•	•		£
5 Total Add lines 1 through 4b	5		1	the organization?	20q2oc	i ioi rodaio, appiy to		$\frac{x}{x}$
Schedule C - Rent Income		Property and	Pers		ease	d With Real Prope	ertv)	
(see instructions)	•	, ,						
Description of property								
(1)								
(2)								
(3)								
(4)					-		-	
	2. Rent receive	ed or accrued						
(a) From personal property (if the per	centage of	(b) From real a	nd perso	onal property (if the percents	ige	3(a) Deductions directly of	connected with the ii d 2(b) (attach schedu	ncome in
rent for personal property is more 10% but not more than 50%)	e than	or rent for p	ersona) (property exceeds 50% or if ed on profit or income)		columns 2(a) and	z(o) (attach schedu	
(1)								
(2)								
(3)								
(4)								
Total	0.	Total			0.			
(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)		0.
Schedule E - Unrelated Det		Income (see	nstruc	ctions)		Traci, into o, column (o)		
		(0.50)		Gross income from		3. Deductions directly conne to debt-finance	ected with or allocat d property	ole
1. Description of debt-fit	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other di	eductions :hedule)
(1)			-					
(2)					-		 	
(3)	"	-						
(4)						• • •		
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis llocable to nced property schedule)	6.	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		e deductions ital of columns and 3(b))
(1)				%				
(2)				%				
(3)				%				
(4)				%	<u> </u>			

Form 990-T (2019)

0.

Enter here and on page 1, Part I, line 7, column (B)

Total dividends-received deductions included in column 8

Part I, line 7, column (A)

0.

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

Entity OMB No 1545-0047

15

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Name	of the organization	/ C1	holt Too		Employer ide				
	Adventist Health System/Sunbelt, Inc. 59-1479658 Unrelated Business Activity Code (see instructions) 812300								
	Inrelated Business Activity Code (see instructions) 81230 escribe the unrelated trade or business Laundry Secribe the unrelated trade or business		<u> </u>						
Par			(A) Income		(B) Expense	es	(C) Net		
1a	Gross receipts or sales 106,485.						• 2	-	
b	Less returns and allowances c Balance ▶	1c	106,48	35.			•		
2	Cost of goods sold (Schedule A, line 7)	2			•				
3	Gross profit Subtract line 2 from line 1c	3	106,48	35.		-	106,4	85.	
4 a	Capital gain net income (attach Schedule D)	4a	·	-			-		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		,						
С	Capital loss deduction for trusts	4c							
5	Income (loss) from a partnership or an S corporation (attach					-]	-		
	statement)	5				,			
6	Rent income (Schedule C)	6							
7	Unrelated debt-financed income (Schedule E)	7							
8	Interest, annuities, royalties, and rents from a controlled								
	organization (Schedule F)	8							
9	Investment income of a section 501(c)(7), (9), or (17)			1					
	organization (Schedule G)	9							
	Exploited exempt activity income (Schedule I)	10			_,				
	Advertising income (Schedule J)	11			_				
12 (Other income (See instructions, attach schedule)	12		<u> </u>		- '-			
13	Total. Combine lines 3 through 12	13	106,48	5.			106,4	<u>85.</u>	
	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the unrelated business incompared to the connected with the connected wit			n dedu	ctions.) (De		ns must be		
	Compensation of officers, directors, and trustees (Schedule K)					14	25,3	<u> </u>	
	Salaries and wages Repairs and maintenance					15	25,3	01.	
	Bad debts					16			
	Interest (attach schedule) (see instructions)					18			
	Taxes and licenses					19			
	Depreciation (attach Form 4562)		20			 " 	· · · · · · · · · · · · · · · · · · ·		
	Less depreciation claimed on Schedule A and elsewhere on return		21a			21b			
	Depletion		(2.0)			22			
	Contributions to deferred compensation plans					23			
	Employee benefit programs					24	9,0	27	
	Excess exempt expenses (Schedule I)					25			
_	Excess readership costs (Schedule J)					26			
	Other deductions (attach schedule)		See St	aten	nent 16	27	38,43	33.	
	Fotal deductions. Add lines 14 through 27					28	72,76		
	Unrelated business taxable income before net operating loss deduct	tion Sub	btract line 28 fron	n line 13		29	33,72		
ю [Deduction for net operating loss arising in tax years beginning on or	after Ja	nuary 1, 2018 (se	e					
	nstructions)		•			30		0.	
:1 L	Unrelated business taxable income Subtract line 30 from line 29			,		31	33,72	24.	
28 1 19 L 10 E	Fotal deductions. Add lines 14 through 27 Unrelated business taxable income before net operating loss deduct Deduction for net operating loss arising in tax years beginning on or Instructions)		otract line 28 fron	n line 13		28 29 30 31	72, 33,	,70 ,72	

_								FIICTCA	13
Forn	n 990-T (2019) Adventist	Health	System/S	unhelt	Inc.		59-147	9658	Page 3
Sc	hedule A - Cost of Good	s Sold. Enter	method of inven	tory valuation	► N/A		33 147	7030	
1	Inventory at beginning of year				ry at end of ye	ar		6	·
2	Purchases	2		7 Cost of	goods sold. S	ubtract l	line 6	33	
3	Cost of labor	3		7	e 5. Enter here				
4 a	Additional section 263A costs			line 2			•	7	
	(attach schedule)	4a		8 Do the r	ules of section	263A (1	with respect to		Yes No
b	Other costs (attach schedule)	4b		property	produced or	acquired	for resale) apply to		
5	Total. Add lines 1 through 4b	5		the orga	inization?				Х
Sc	hedule C - Rent Income	(From Real	Property and	Personal I	Property L	ease	d With Real Prop	erty)	
(s	ee instructions)								
1. 0	escription of property								
(1)						-			
(2)									
(3)			<u> </u>						
(4)								*	
			ed or accrued				3(a) Deductions directly	connected with the	income in
	(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	than	of rent for p	nd personal propert ersonal property ex t is based on profit	ceeds 50% or 17	ige	columns 2(a) ar	d 2(b) (attach sched	ule)
(1)									_
(2)									
(3)									
(4)									
Total		0.	Total			0.			
• •	otal income. Add totals of columns 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.
_	nedule E - Unrelated Deb		Income (see	instructions)			<u> </u>		
			(444	2. Gross inc	come from		3. Deductions directly cont to debt-finance	nected with or allocal ed property	ble
	1. Description of debt-fit	nanced property		or allocable financed		(a)	Straight line depreciation (attach schedule)	(b) Other of (attach se	deductions chedule)
(1)									
(2)	<u> </u>								
(3)									
(4)									
ı	Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis illocable to iced property schedule)	6. Column by colu			7. Gross income reportable (column 2 x column 6)	(column 6 x to	e deductions otal of columns nd 3(b))
(1)					%				
(2)					%				
(3)					%				
(4)					%	1		1	

0.

0.

Enter here and on page 1, Part I, line 7, column (B)

Totals

Enter here and on page 1, Part I, line 7, column (A)

0.

Total dividends-received deductions included in column 8

Department of the Treasury Internal Revenue Service

Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

► Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Entity OMB No 1545-0047

501(c)(3) Organizations Only

Nam	a of the organization Adventist Health System,	/Sur	nbelt, Inc.	Employer ide		
$\overline{}$	Unrelated Business Activity Code (see instructions) ► 81290					
	Describe the unrelated trade or business > Spa Servi	ces				
	rt I Unrelated Trade or Business Income		(A) Income	(B) Expense	es	(C) Net
1 a	Gross receipts or sales 745,074.			F	, 	₹ = • = ₹ = • ₹
b	Less returns and allowances c Balance ▶	_1c	745,074.	- A	· · · · ·	
2	Cost of goods sold (Schedule A, line 7)	2			<u> </u>	
3	Gross profit Subtract line 2 from line 1c	_3	745,074.	T. T. T. T.		745,074.
4 a	Capital gain net income (attach Schedule D)	4a		9-7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	·	
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b				
С	Capital loss deduction for trusts	4c				
5	Income (loss) from a partnership or an S corporation (attach			, a		
	statement)	5				
6	Rent income (Schedule C)	6	_			
7	Unrelated debt-financed income (Schedule E)	7				
8	Interest, annuities, royalties, and rents from a controlled					
	organization (Schedule F)	8				
9	Investment income of a section 501(c)(7), (9), or (17)				·	• • • •
	organization (Schedule G)	9				
10	Exploited exempt activity income (Schedule I)	10				
11	Advertising income (Schedule J)	11				
12	Other income (See instructions, attach schedule)	12		LEGINE	- 3	
13	Total. Combine lines 3 through 12	13	745,074.		-	745,074.
	Deductions Not Taken Elsewhere (See instruction directly connected with the unrelated business income	come	e.)		7	
14	Compensation of officers, directors, and trustees (Schedule K)				_14	200 500
15	Salaries and wages				15	389,582.
16	Repairs and maintenance				16	
17	Bad debts .				17	
18	Interest (attach schedule) (see instructions)				18	
19	Taxes and licenses		,		19	
20	Depreciation (attach Form 4562)	-	20		34	
21	Less depreciation claimed on Schedule A and elsewhere on return		_21a		21b	
22	Depletion				22	
23	Contributions to deferred compensation plans				23	111 006
24	Employee benefit programs				24	141,996.
25	Excess exempt expenses (Schedule I)				25	·
26	Excess readership costs (Schedule J)				26	
27	Other deductions (attach schedule)		See Stat	ement 17	27	302,135.
28	Total deductions. Add lines 14 through 27			•	28	833,713.
29	Unrelated business taxable income before net operating loss deduc			13	29	-88,639.
30	Deduction for net operating loss arising in tax years beginning on or	after .	January 1, 2018 (see	_	1.	-
	instructions)			Stmt 18		0.
31	Unrelated business taxable income Subtract line 30 from line 29			<u> </u>	31	-88,639.
ШΔ	For Panerwork Reduction Act Notice see instructions			9/	hedul	e M (Form 990-T) 2019

Form 990-T (2019)

	Adventist	Health	System/S	unk	elt,		_	59- <u>1</u> 4	<u> 796</u>	58	rayc .
	hedule A - Cost of Good	IS SOIG. Enter	method of inver	$\overline{}$		► N/A			1 :		
1	Inventory at beginning of year	· - 1 - 1	_	7		at end of yea			-6		
2	Purchases	2		┤ ′	_	oods sold S			13		
3	Cost of labor	3		4		5. Enter here	and in i	Part I,	ــِـنا		
4 a	Additional section 263A costs			١.	line 2		. 0004 /		<u></u>	<u> </u>	Yes No
	(attach schedule)	4a		- 8				with respect to		<u> </u>	
	Other costs (attach schedule)	46		┥		•	acquired	I for resale) apply to		<u> </u>	, X
	Total. Add lines 1 through 4b hedule C - Rent Income	(From Real	Property and	Dor	the organ		A25A	d With Baal Pro	nert	<u>,,</u> V	1 1
	ee instructions)		. roperty une		Jonari	roperty E		a with real re	perty	··	
1. 0	lescription of property										
(1)											
(2)											
(3)					<u> </u>						
(4)								_			
			ed or accrued					3(a) Deductions direc	thi conn	natad with the ine	
	(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	of rent for p	personal	onal property property exc ed on profit o	(if the percenta seeds 50% or if or income)	ge			(attach schedule)	
(1)											
(2)											
(3)											
(4)											
Total	l	0.	Total				0.				-
(c) To	otal income. Add totals of columns	2(a) and 2(b). En	ter					(b) Total deductions. Enter here and on page 1.			
	and on page 1, Part I, line 6, columi						0.	Part I, line 6, column (B)	•		0.
Sch	nedule E - Unrelated Deb	ot-Financed	Income (see	ınstru	ctions)		_				
				1 ,	2. Gross inci	ome from		 Deductions directly control to debt-final 	nnected	with or allocable sperty	
	1. Description of debt-fit	nanced property		1	or allocable financed p	to debt-	(a)	Straight line depreciation	丁	(b) Other ded	
		, and a property			ппансео р	торату		(attach schedule)		attach sche	dule)
(1)				╁╾					+		
(2)											
(3)								· · · · · · · · · · · · · · · · · · ·			
(4)			-								
	Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-final	adjusted basis ilocable to nced property i schedule)	6	Column 4 by colum			7 Gross income reportable (column 2 x column 6)		8. Allocable de (column 6 x total 3(a) and	of columns
(1)				 		%			\top		
						%					
(2) (3)						%					
(4)						%					
								nter here and on page 1, lart I, line 7, column (A)		Enter here and or Part I, line 7, col	
Tota	İs							C).		0.
	l dividends-received deductions an	icluded in column	8								0.

Form 990-T	Other Deductions	Statement 1
Description	· -	Amount
Supplies Rent Utilities Travel Purchased Serv Other Expenses		810,006. 45,290. 13,775. 6,924. 747,637. 998,871.
Total to Form	990-T, Page 1, line 27	2,622,503.
Form 990-T	Parent Corporation's Name and Identifying Number	Statement 2
Corporation's	Name	Identifying No
Adventist Heal	th System Sunbelt Healthcare Corporation	59-2170012

		Other Ded	uctions	Statement 3
Description				Amount
Supplies				5,779,805:
Purchased Servi	ces			41,288.
Rent				46,206.
Utilities				1,153.
Travel				1,198.
Other Expenses				521,662.
Total to Schedu	le M, Part II	, line 27		6,391,312.
Schedule M	Net	Operating Lo	ss Deduction	Chahamanh A
				Statement 4
Tax Year Loss	s Sustained	Loss Previously Applied	Loss Remaining	Available This Year
Tax Year Loss	s Sustained	Previously		Available

	(M)		Other Deduct	ions	Statement 5
Description					Amount
Supplies					28,801
Purchased Se	ervices	3			161
Rent Utilities					12,688
Travel					32. · 38.
Other Expens	ses				-1,260
Total to Sch	hedule	M. Part II.	. line 27		40.460.
Total to Sch	hedule	M, Part II,	, line 27		40,460.
Total to Sch	nedule		, line 27 Operating Loss	Deduction	40,460. Statement 6
				Deduction Loss Remaining	
Schedule M		Net	Operating Loss Loss Previously	Loss	Statement 6 Available

Form 990-T (M)	Other Deductions	Statement 7
Description		Amount
Supplies Purchased Services Utilities		1,874. 209. 2,307.
Other Expenses Total to Schedule M, Part II, 1	ine 27	609. ————————————————————————————————————

Form 990-T (M) Income (Loss) from Partnerships	Statement 8
Description	Net Income or (Loss)
Central Texas Ambulatory Endoscopy - Ordinary Business Income (loss)	170.
Central Texas Ambulatory Endoscopy - Net Rental Real Estate Income	13,560.
Total Included on Schedule M, Part I, line 5	13,730.

Form 990-T (M)	Other Deductions	Statement 9
Description		Amount
Utilities Other Expenses Purchased Services		21,841. 233,782. 1,699.
Total to Schedule M, Part II, li	ne 27	257,322.

Form 990-T (M)	Other Deductions	Statement 10
Description	(Amount
Supplies Purchased Services Rent Other Expenses		973. 1,221. 23. 5,573.
Total to Schedule M, Part II, li	ne 27	7,790.

Form 990-T (M)	Other Deductions	Statement 11
Description		Amount
Supplies Purchased Services Rent Utilities Travel Other Expenses		1,260,391. -152,259. 219,012. 127. 40,576. 314,497.
Total to Schedule M, Part II, li	ne 27	1,682,344.

Form 990-	r (M) Inco	ome (Loss) from P	artnerships	Statement 12
Description	on			Net Income or (Loss)
Orlando Sp	portsplex LTD - Ord	linary Business I	ncome (loss)	-939,995
Total Incl	luded on Schedule M	, Part I, line 5		-939,995
Schedule N	1 Net	Operating Loss	Deduction	Statement 13
Schedule M	Met Loss Sustained	Doperating Loss Loss Previously Applied	Deduction Loss Remaining	Statement 13 Available This Year
		Loss Previously	Loss	Available

Form 990-T (M)	Other Deduct	ions	Statement 14
Description			٠	Amount
Supplies Purchased Serv	vices			120,621. 11.
Total to Sched	dule M, Part II	, line 27		120,632.
Schedule M	Net	Operating Loss	Deduction	Statement 15
				Deatement 13
Tax Year Lo	oss Sustained	Loss Previously Applied	Loss Remaining	Available This Year
	20 510		20.510	
12/31/18	32,518.		32,518.	32,518.

Form 990-T (M)	Other Deductions	Statement 16
Description		Amount
Supplies Purchased Services Rent Utilities Other Expenses		21,508. 489. 5,383. 5,557. 5,496.
Total to Schedule M, Part II, li	ne 27	38,433.

Form 990-T (M)		Other Deduct	ions	Statement 17
Description				Amount
Supplies Purchased Service Rent Travel	ès			177,601 11,433 48,742 220
Utilities Other Expenses				308. 63,831.
Total to Schedule	M, Part II	, line 27		302,135
				·
Schedule M	Net	Operating Loss	Deduction	Statement 18
	Net Sustained	Operating Loss Loss Previously Applied	Deduction Loss Remaining	Statement 18 Available This Year
	·	Loss Previously	Loss	Available

Form 990-T (M) I	Deductions	Connected	with	n Rental	Income	Statement 19
Description			1	Activity Number	Amount	Total
Salaries & wages Benefits Supplies			_		1,551. 465. 8,786.	
Supplies Repairs and Mainte	, anango	- Subtotal	L -	1	15,793. 14,036.	10,802.
Repairs and Mainte		- Subtotal	L -	2	7,344.	29,829.
Depreciation		- Subtotal	L -	3	5,139.	12,483.
Total to Form 990-	T, Schedul	le C, Colum	nn 3			53,114.

Form 990-T (M) Schedule E - Othe	r Deductions		Statement 20
Description	Activity Number	Amount	Total
Utilities Depreciation - Subtotal	- 1	5,153. 9,525.	14,678.
Total of Form 990-T, Schedule E, Column	3(b)		14,678.