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17 Bad debts Interest (attach schedule) (see instructions) 18 Interest (attach schedule) (see instructions) 19 Taxes and licenses 19 Depreciation (attach Form 4562) 20 Less depreciation claimed on Schedule A'and elsewhere on return 21 Depletion 22 Contributions to deferred compensation plans 23 Employee benefit programs 24 Excess exempt expenses (Schedule I) 25 Excess readership costs (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 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (See instructions) 31 Unrelated business taxable income. Subtract line 30 from line 29		•						15				
Interest (attach schedule) (see instructions) Taxes and licenses Depreciation (attach Form 4562) Less depreciation claimed on Schedule Aand 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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	16 Repairs and mainten	ance						16				
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 readership costs (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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	17 Bad debts							17				
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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (See instructions) Unrelated business taxable income. Subtract line 30 from line 29	18 Interest (attach sche	dule) (s	ee instructions)					18				
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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	19 Taxes and licenses								<u> </u>			
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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	20 Depreciation (attach	Form 4	562)		20			31.2.4				
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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	21 Less depreciation cla	aimed oi	n Schedule A and elsewhere on return		21a		_	21b	<u> </u>			
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 line 13 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) Unrelated business taxable income. Subtract line 30 from line 29	•							22	└			
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29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 30 Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) 31 Unrelated business taxable income. Subtract line 30 from line 29 OGDEN, 31 0.							17.	27	炽			
see instructions) OGDEN, 30T 0. Unrelated business taxable income. Subtract line 30 from line 29	/				<u> </u>	25	1785	1288	Hĕl			
see instructions) OGDEN, 30T 0. Unrelated business taxable income. Subtract line 30 from line 29	/				8 from line 13	8 INU	Y 2 3 /2	- <u>4-59</u> _	Hŵl	14,103.		
31 Unrelated business taxable income. Subtract line 30 from line 29		erating	loss arising in tax years beginning on or after Janua	ry 1, 20)18			+	₩	^		
31 Unrelated dusiness taxable income. Subtract line 30 from line 29	<i></i>		0.14.4.1		}	OG	DEN.	, जिंद	├			
		_			<u>_</u>			-j-31-	荢			

Form 990-	(2018) RUSH MEDICAL FOUNDATION	64-0345119 Page 2
Part	III Total Unrelated Business Taxable Income	
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32 14,103.
33	Amounts paid for disallowed fringes	38
34	Charitable contributions (see instructions for limitation rules)	3,4 0.
	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33	$5 \frac{3}{3} \frac{14,103}{1}$
	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36
37		$7 _{37} _{37} _{14,103}$
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	8 38 1,000.
	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	
_	enter the smaller of zero or line 37	13,103.
Part	IV Tax Computation	
ÃÔ	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	► 40 2,752.
	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	
	Tax rate schedule or Schedule D (Form 1041)	▶ 41
42	Proxy tax. See instructions	▶ 42
	Alternative minimum tax (trusts only)	43
	Tax on Noncompliant Facility Income. See instructions	44
	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	7 45 2,752.
Part	Y Tax and Payments	
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a	
	Other credits (see instructions) 46b	7
	General business credit. Attach Form 3800 46c	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	
	Total credits. Add lines 46a through 46d	46e
47	Subtract line 46e from line 45	47 2,752.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedul	
49		4 49 2,752.
	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50 0.
51 a	Payments: A 2018 overpayment credited to 2019 51a	
	2019 estimated tax payments 51b	\neg
	Tax deposited with Form 8868	\neg
	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	\neg
	Backup withholding (see instructions) 51e	\neg \mid
	Credit for small employer health insurance premiums (attach Form 8941) 51f	\neg 1
a	Other credits, adjustments, and payments: Form 2439	
	☐ Form 4136 ☐ Other Total ▶ 51g	
52	Total payments. Add lines 51a through 51g	52
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	S 53 108.
	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed STATEMENT 3	9 54 2,860.
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	▶ 55
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	<u> </u>
Part	VI Statements Regarding Certain Activities and Other Information (see instructions)	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file	
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	<u> </u>
	here >	X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	X
	If "Yes," see instructions for other forms the organization may have to file.	
59	Enter the amount of tax-exempt interest received or accrued during the tax year 🕨 \$	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my kno correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	wledge and belief, it is true,
Sign		May the IRS discuss this return with
Here	Signature of officer Date TREASURER Title	the preparer shown below (see
	Signature of officer Date Title	instructions)? X Yes No
	Print/Type preparer's name Preparer's signature Date Check] if PTIN
Paid	AMIE T. AMIE T. Church Wolfe self-employ	
Prep	parer WHITTINGTON, CPA WHITTINGTON, CPA 10/05/20	P01082167
	Only Firm's name ► HORNE LLP Firm's EIN	▶ 20-1941244
	661 SUNNYBROOK ROAD, STE. 100	
	Firm's address ► RIDGELAND, MS 39157 Phone no.	601-326-1000 -
923711 0	01-27-20	Form 990-T (2019)

Schedule A - Cost of Goods	Sold. Enter	method of invent	ory v	aluation N/A				
1 Inventory at beginning of year	1		6	Inventory at end of year	ar		6	
2 Purchases	2] 7	Cost of goods sold. S	ubtract l	ine 6		
3 Cost of labor	3]	from line 5. Enter here	and in f	Part I,		
4a Additional section 263A costs]	line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (1	with respect to		Yes No
b Other costs (attach schedule)	4b]	property produced or a	acquired	for resale) apply to		
5 Total. Add lines 1 through 4b	5		<u> </u>	the organization?				
Schedule C - Rent Income (From Real	Property and	Per	sonal Property L	.ease	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 perconal property is more 10% but not more than 50%)	centage of than	or rentior po	ersonai	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ge	3(a) Deductions directly of columns 2(a) and	connected with th d 2(b) (attach sche	e income in adule)
(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	ı (A)	>			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	nstru	ctions)				
						3. Deductions directly conne to debt-finance		cable
1 8			1	. Gross income from or allocable to debt-	(a)	Straight line depreciation	T	r deductions
Description of debt-fir	anced property			financed property	`-'	(attach schedule)		schedule)
(1)								
(2)				· -				
(3)								
(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)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(column 6 >	ible deductions ctotal of columns) and 3(b))
(1)				%			1	
(2)				%				
(3)				%				
(4)				%			İ	
				· · · · · · · · · · · · · · · · · · ·		nter here and on page 1, Part I, line 7, column (A)		and on page 1, 7, column (B)
Tatala					·	0.	. 20,,	0.
Totals Total dividends-received deductions in	cluded in column	. 8		-	L	<u> </u>	 	0.
TOTAL GIALGERAS LECEIAER REGRETIONS III	GIGGER III COIDIII	10					L	

Schedule F - Interest, A					Controlled O						
1. Name of controlled organization		2. Emp identific numb	ation	3. Net unr (loss) (see	elated income instructions)	tions) 4. Total of s payments		al of specified included in the organization's g		olling	6. Deductions directly connected with income in column 5
(1)			_								
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	zations										
7. Taxable Income	8. Net ur	related income ee instructions		9. Total	of specified payr made	nents	10. Part of colu in the controll gros	mn 9 tha ing organ s income	nization's		uctions directly connected income in column 10
(1)											
(2)					_						
(3)											
(4)											
							Add colur Enter here and line 8,		1, Part I,	Enter he	i columns 6 and 11 re and on page 1, Part I, ine 8, column (B)
Totals						<u> </u>			0.		0
Schedule G - Investmer (see instr		ne of a S	ection	501(c)(7	'), (9), or (17) Org	anization				
1. Descr	ription of incor	me			2. Amount of	income	 Deduction directly connected (attach schedule) 	cted	4. Set- (attach s	esides chedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)									<u>L</u>		
(2)		_									
(3)											
(4)											
					Enter here and Part I, line 9, co						Enter here and on page Part I, line 9, column (B)
Totals				>		٥.١					0
Schedule I - Exploited	-	Activity	Income	e, Other	Than Adv	ertisin	g Income				
Description of exploited activity	<u> </u>	e from	directly of with pro of uni	penses connected oduction elated s income	4. Net inconfrom unrelated business (cominus colum gain, computitional)	trade or dumn 2 n 3) If a e cols 5	5. Gross inc from activity is not unrela business inco	that ted	6. Exp attribut colur	able to	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											1
(2)											
(3)											
(4)									1		
	Enter her page 1 line 10,	col (A)	page 1	re and on I, Part I, col (B)							Enter here and on page 1, Part II, line 25
Totals Schedule J - Advertisir	l lnoc-	0.		0.	1						0
			struction			Dania					
Part I Income From I	Periodic	als Repo	ortea or	n a Cons	solidated 	Basis					_ ,
1. Name of periodical		2. Gross advertising income		3. Direct ertising costs	4. Adversor (loss) (c col 3) If a g cols 5 th		5. Circula income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)									L		
(2)											
(3)			1								
(4)					7			•	T		
			\neg				1				
Totals (carry to Part II, line (5))	>	(<u>. </u>	0							0 Form 990-T (201

Form 990-T (2019) RUSH MEDICAL FOUNDATION 64-03451 Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1, Name of periodical		2. Gross advertising income	3. Direct advertising costs	Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	5. Circulation income	6. Readership costs	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)							
(2)							
(3)							
(4)							
Totals from Part I	•	0.	0.			*	0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			•	Enter here and on page 1, Part II, line 26
Totals, Part II (lines 1-5)	▶	0.	0.		•		0.

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

1. Name	2. Title	 Percent of time devoted to business 	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		>	0.

Form 990-T (2019)

FORM, 990-T	DESCRIPTION	OF ORGANIZATION'S PF	RIMARY UNRELATED	STATEMENT 1
		BUSINESS ACTIVITY		

ADMINISTRATIVE FEES FOR NON-PARTNER TRANSACTIONS

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER INCOME	STATEMENT 2
DESCRIPTION		AMOUNT
PREMIER PURCHASING PARTNERS, I	L.P.	14,103.
TOTAL TO FORM 990-T, PAGE 1, 1	LINE 12	14,103.

FORM 990-T	INTERE	ST AND PENA	LTIES		STA	TEMENT 3
						2,752. 108. 28. 55.
TOTAL AMOUNT DU	E					2,943.
FORM 990-T	LA	TE PAYMENT	INTEREST		STA	rement 4
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST
DESCRIPTION TAX DUE DATE FILED	DATE 07/15/20 11/15/20	2,752.	2,752. 2,780.	.0300		28.

RUSH MEDICAL FOUNDATION

FORM. 990-T	LATE PA	YMENT PENALT	STATEMENT 5		
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY
TAX DUE DATE FILED	07/15/20 11/15/20	2,752.	2,752. 2,752.	4	55.
TOTAL LATE PAYMENT	PENALTY				55.