

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 2019

2018

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

Form 990-T header section including: A Check box if address changed, B Exempt under section (501(C)(23)), C Book value of all assets at end of year (606,609,494), D Employer identification number (74-1109665), E Unrelated business activity code (621500), F Group exemption number (0928), G Check organization type (501(c) corporation).

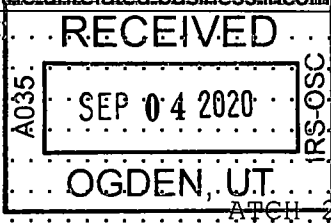
H Enter the number of the organization's unrelated trades or businesses (3) Describe the only (or first) unrelated trade or business here (REFERENCE LAB)

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? (Yes)

J The books are in care of (STEPHANIE PARKER) Telephone number (210-704-2624)

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales (861,544), Total (391,823).

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Charitable contributions, Total deductions (39,136), Unrelated business taxable income (352,687).



Received in Batching Ogden SEP 30 2020

SCANNED NOV 17 2020

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 with amounts like 353,221 and 352,221.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 with amounts like 73,966.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-45e, 46-49, 50a-50g, 51-55 with amounts like 102,656 and 28,021.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 56, 57, and 58.

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Paid Preparer Use Only: Print/Type preparer's name (JANICE K MARTIN), Preparer's signature, Date (06/12/20), PTIN (P00900299), Firm's name (ERNST & YOUNG U.S. LLP), Firm's EIN (34-6565596), Firm's address (111 MONUMENT CIR, STE 4000, INDIANAPOLIS, IN 46204), Phone no (317-681-7000).

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ▶

<b>1</b> Inventory at beginning of year	<b>1</b>		<b>6</b> Inventory at end of year	<b>6</b>	
<b>2</b> Purchases	<b>2</b>	234,860.	<b>7</b> Cost of goods sold Subtract line 6 from line 5 Enter here and in Part I, line 2	<b>7</b>	469,721.
<b>3</b> Cost of labor	<b>3</b>	234,861.	<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
<b>4a</b> Additional section 263A costs (attach schedule)	<b>4a</b>				
<b>b</b> Other costs (attach schedule)	<b>4b</b>				
<b>5</b> Total. Add lines 1 through 4b	<b>5</b>	469,721.			X

**Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

**1. Description of property**

(1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

(4) \_\_\_\_\_

<b>2 Rent received or accrued</b>		<b>3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)</b>
<b>(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)</b>	<b>(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)</b>	
(1)		
(2)		
(3)		
(4)		
<b>Total</b>	<b>Total</b>	

**(c) Total income.** Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) . . . . ▶

**(b) Total deductions** Enter here and on page 1, Part I, line 6, column (B) ▶

**Schedule E - Unrelated Debt-Financed Income** (see instructions)

<b>1 Description of debt-financed property</b>	<b>2. Gross income from or allocable to debt-financed property</b>	<b>3 Deductions directly connected with or allocable to debt-financed property</b>		
		<b>(a) Straight line depreciation (attach schedule)</b>	<b>(b) Other deductions (attach schedule)</b>	
(1)				
(2)				
(3)				
(4)				
<b>4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</b>	<b>5 Average adjusted basis of or allocable to debt-financed property (attach schedule)</b>	<b>6 Column 4 divided by column 5</b>	<b>7. Gross income reportable (column 2 x column 6)</b>	<b>8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))</b>
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b> . . . . . ▶			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
<b>Total dividends-received deductions included in column 8</b> . . . . . ▶				

**Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)

Totals . . . . . ▶

**Schedule G—Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

Totals . . . . . ▶

**Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26

Totals . . . . . ▶

**Schedule J—Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5)) . . . ▶

**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	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I.</b> . . . . . ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
<b>Totals, Part II (lines 1-5)</b> . . . . . ▶						

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

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

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income for  
Unrelated Trade or Business**

OMB No 1545-0687

**2018**

For calendar year 2018 or other tax year beginning 07/01, 2018, and ending 06/30, 20 19

Department of the Treasury  
Internal Revenue Service

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

Name of organization

CHRISTUS SANTA ROSA HEALTH CARE CORPORATION

Employer identification number

74-1109665

Unrelated business activity code (see instructions) ▶ 900099

Describe the unrelated trade or business ▶ OIL & GAS ROYALTIES

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b> Gross receipts or sales	<u>328.</u>			
<b>b</b> Less returns and allowances				
<b>c</b> Balance ▶		<b>1 c</b> <u>328.</u>		
<b>2</b> Cost of goods sold (Schedule A, line 7)		<b>2</b>		
<b>3</b> Gross profit Subtract line 2 from line 1c		<b>3</b> <u>328.</u>		<u>328.</u>
<b>4 a</b> Capital gain net income (attach Schedule D)		<b>4 a</b>		
<b>b</b> Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		<b>4 b</b>		
<b>c</b> Capital loss deduction for trusts		<b>4 c</b>		
<b>5</b> Income (loss) from a partnership or an S corporation (attach statement)		<b>5</b>		
<b>6</b> Rent income (Schedule C)		<b>6</b>		
<b>7</b> Unrelated debt-financed income (Schedule E)		<b>7</b>		
<b>8</b> Interest, annuities, royalties, and rents from a controlled organization (Schedule F)		<b>8</b>		
<b>9</b> Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		<b>9</b>		
<b>10</b> Exploited exempt activity income (Schedule I)		<b>10</b>		
<b>11</b> Advertising income (Schedule J)		<b>11</b>		
<b>12</b> Other income (See instructions, attach schedule)		<b>12</b>		
<b>13</b> Total. Combine lines 3 through 12		<b>13</b> <u>328.</u>		<u>328.</u>

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

<b>14</b> Compensation of officers, directors, and trustees (Schedule K)		<b>14</b>		
<b>15</b> Salaries and wages		<b>15</b>		
<b>16</b> Repairs and maintenance		<b>16</b>		
<b>17</b> Bad debts		<b>17</b>		
<b>18</b> Interest (attach schedule) (see instructions)		<b>18</b>		
<b>19</b> Taxes and licenses		<b>19</b>		
<b>20</b> Charitable contributions (See instructions for limitation rules)		<b>20</b>		
<b>21</b> Depreciation (attach Form 4562)	<b>21</b>			
<b>22</b> Less depreciation claimed on Schedule A and elsewhere on return	<b>22a</b>		<b>22b</b>	
<b>23</b> Depletion		<b>23</b>		
<b>24</b> Contributions to deferred compensation plans		<b>24</b>		
<b>25</b> Employee benefit programs		<b>25</b>		
<b>26</b> Excess exempt expenses (Schedule I)		<b>26</b>		
<b>27</b> Excess readership costs (Schedule J)		<b>27</b>		
<b>28</b> Other deductions (attach schedule)		<b>28</b>		
<b>29</b> Total deductions. Add lines 14 through 28		<b>29</b>		
<b>30</b> Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13		<b>30</b>		<u>328.</u>
<b>31</b> Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)		<b>31</b>		
<b>32</b> Unrelated business taxable income Subtract line 31 from line 30		<b>32</b>		<u>328.</u>

For Paperwork Reduction Act Notice, see instructions

Schedule M (Form 990-T) 2018

**SCHEDULE M  
(Form 990-T)**

**Unrelated Business Taxable Income for  
Unrelated Trade or Business**

OMB No 1545-0687

**2018**

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501(c)(3) Organizations Only

Name of organization **CHRISTUS SANTA ROSA HEALTH CARE CORPORATION** Employer identification number **74-1109665**

Unrelated business activity code (see instructions) ▶ **722320**  
Describe the unrelated trade or business ▶ **CAFETERIA CATERING**

<b>Part I Unrelated Trade or Business Income</b>		(A) Income	(B) Expenses	(C) Net
<b>1 a</b>	Gross receipts or sales <u>4,461.</u>			
<b>b</b>	Less returns and allowances			
	<b>c Balance ▶</b>	<b>1 c</b>		
<b>2</b>	Cost of goods sold (Schedule A, line 7) . . . . . <u>ATCH. 5</u>	<b>2</b>		
<b>3</b>	Gross profit Subtract line 2 from line 1c . . . . .	<b>3</b>		<b>1,988.</b>
<b>4 a</b>	Capital gain net income (attach Schedule D) . . . . .	<b>4 a</b>		
<b>b</b>	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) . .	<b>4 b</b>		
<b>c</b>	Capital loss deduction for trusts . . . . .	<b>4 c</b>		
<b>5</b>	Income (loss) from a partnership or an S corporation (attach statement) . . . . .	<b>5</b>		
<b>6</b>	Rent income (Schedule C) . . . . .	<b>6</b>		
<b>7</b>	Unrelated debt-financed income (Schedule E) . . . . .	<b>7</b>		
<b>8</b>	Interest, annuities, royalties, and rents from a controlled organization (Schedule F) . . . . .	<b>8</b>		
<b>9</b>	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) . . . . .	<b>9</b>		
<b>10</b>	Exploited exempt activity income (Schedule I) . . . . .	<b>10</b>		
<b>11</b>	Advertising income (Schedule J) . . . . .	<b>11</b>		
<b>12</b>	Other income (See instructions, attach schedule) . . . . .	<b>12</b>		
<b>13</b>	<b>Total.</b> Combine lines 3 through 12 . . . . .	<b>13</b>	<b>1,988.</b>	<b>1,988.</b>

<b>Part II Deductions Not Taken Elsewhere</b> (See instructions for limitations on deductions ) (Except for contributions, deductions must be directly connected with the unrelated business income )			
<b>14</b>	Compensation of officers, directors, and trustees (Schedule K) . . . . .	<b>14</b>	
<b>15</b>	Salaries and wages . . . . .	<b>15</b>	<b>1,442.</b>
<b>16</b>	Repairs and maintenance . . . . .	<b>16</b>	
<b>17</b>	Bad debts . . . . .	<b>17</b>	
<b>18</b>	Interest (attach schedule) (see instructions) . . . . .	<b>18</b>	
<b>19</b>	Taxes and licenses . . . . .	<b>19</b>	<b>340.</b>
<b>20</b>	Charitable contributions (See instructions for limitation rules) . . . . .	<b>20</b>	
<b>21</b>	Depreciation (attach Form 4562) . . . . .	<b>21</b>	
<b>22</b>	Less depreciation claimed on Schedule A and elsewhere on return . . . . .	<b>22 a</b>	
<b>23</b>	Depletion . . . . .	<b>23</b>	
<b>24</b>	Contributions to deferred compensation plans . . . . .	<b>24</b>	
<b>25</b>	Employee benefit programs . . . . .	<b>25</b>	
<b>26</b>	Excess exempt expenses (Schedule I) . . . . .	<b>26</b>	
<b>27</b>	Excess readership costs (Schedule J) . . . . .	<b>27</b>	
<b>28</b>	Other deductions (attach schedule) . . . . .	<b>28</b>	
<b>29</b>	<b>Total deductions.</b> Add lines 14 through 28 . . . . .	<b>29</b>	<b>1,782.</b>
<b>30</b>	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	<b>30</b>	<b>206.</b>
<b>31</b>	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions) . . . . .	<b>31</b>	
<b>32</b>	<b>Unrelated business taxable income</b> Subtract line 31 from line 30 . . . . .	<b>32</b>	<b>206.</b>

For Paperwork Reduction Act Notice, see instructions Schedule M (Form 990-T) 2018

CHRISTUS SANTA ROSA HEALTH CARE CORPORATION

74-1109665

ATTACHMENT 1

NAME AND FEIN OF PARENT CORPORATION

CHRISTUS HEALTH 76-0590551



FORM 990T - PART II - LINE 20 - CHARITABLE CONTRIBUTIONS

UNRELATED TRADE OR BUSINESS INCOME	391,823.
ADD: DOMESTIC PRODUCTION ACTIVITIES DEDUCTION (DPAD)	0.
LESS: DEDUCTIONS W/O CHARITABLE CONTRIBUTIONS & DPAD & NOL CARRYOVER	0.
	<u>0.</u>
	* 10%
CHARITABLE CONTRIBUTION LIMITATION (10%)	39,182.
CHARITABLE CONTRIBUTION	39,136.
<u>CHARITABLE CONTRIBUTION DEDUCTION (SMALLER OF THE ABOVE TWO)</u>	<u>39,136.</u>

FORM 990T - LINE 50G - OTHER CREDITS AND PAYMENTS

FROM FORM 2439  
FROM FORM 4136

TOTAL LINE 50G - OTHER CREDITS AND PAYMENTS 2,656.

CAFETERIA CATERING

SCHEDULE M LINE 2: SCHEDULE A - COST OF GOODS SOLD

1	INVENTORY AT BEGINNING OF YEAR ...		
2	PURCHASES .....	2,473.	
3	COST OF LABOR .....		
4A	ADDITIONAL SECTION 263A COSTS ....		
	B OTHER COSTS .....		
5	TOTAL. ADD LINES 1 THROUGH 4B ....	2,473.	
6	INVENTORY AT END OF YEAR .....		
7	COST OF GOODS SOLD.		
	(SUBTRACT LINE 6 FROM LINE 5) .....		<u>2,473.</u>
8	DO THE RULES OF SECTION 263A (WITH RESPECT TO PROPERTY PRODUCED OR ACQUIRED FOR RESALE) APPLY TO THE ORGANIZATION?		YES    NO X