

Form 990-T

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

OMB No 1545-0047

For calendar year 2019 or other tax year beginning 07/01, 2019, and ending 06/30, 2020

2019

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

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)

A Check box if address changed

Name of organization (Check box if name changed and see instructions)

D Employer identification number (Employees' trust, see instructions)

B Exempt under section: X 501(c) 3, 408(e) 220(e), 408A, 530(a), 529(a)

Print or Type

CHRISTUS HEALTH GULF COAST

76-0591592

Number, street, and room or suite no If a P O box, see instructions

919 HIDDEN RIDGE DRIVE

E Unrelated business activity code (See instructions)

City or town, state or province, country, and ZIP or foreign postal code

IRVING, TX 75038

C Book value of all assets at end of year

F Group exemption number (See instructions) 0928

14,398,195.

G Check organization type: X 501(c) corporation, 501(c) trust, 401(a) trust, Other trust

H Enter the number of the organization's unrelated trades or businesses 1 Describe the only (or first) unrelated trade or business here ATCH 1

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

J The books are in care of KIM REYNOLDS Telephone number 469-282-2103

Table with 4 columns: Description, (A) Income, (B) Expenses, (C) Net. Includes rows for Gross receipts, Cost of goods sold, Capital gain, etc. A large 'RECEIVED' stamp is overlaid on the table.

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

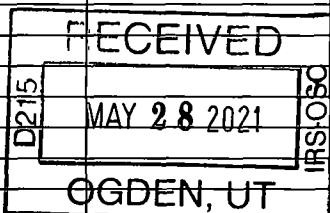
Table with 3 columns: Description, (A) Income, (B) Expenses. Includes rows for Compensation of officers, Salaries and wages, Repairs and maintenance, etc.

For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2019)

SCANNED JUN 29 2021

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Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Rows include Total of unrelated business taxable income, Charitable contributions, and Unrelated business taxable income.

Part IV Tax Computation

Table with 2 columns: Description and Amount. Rows include Organizations Taxable as Corporations, Trusts Taxable at Trust Rates, and Total tax.

Part V Tax and Payments

Table with 2 columns: Description and Amount. Rows include Foreign tax credit, Other taxes, Total tax, Payments, and Total payments.

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

Table with 3 columns: Question, Yes, No. Rows include questions about foreign accounts, foreign trusts, and tax-exempt interest.

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

Signature and Preparer information section including fields for Signature of officer, Date, Title, and Preparer's signature.

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

Table with 8 rows and 4 columns for Schedule A. Rows include: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4a Additional section 263A costs, 4b Other costs, 5 Total, 6 Inventory at end of year, 7 Cost of goods sold, 8 Do the rules of section 263A...

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

(see instructions)

1. Description of property

Table with 4 rows for description of property (1) through (4).

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, 3(a) Deductions directly connected with the income. Includes rows (1) through (4) and a Total row.

(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)

Table with 5 columns: 1 Description of debt-financed property, 2 Gross income from or allocable to debt-financed property, 3 Deductions directly connected with or allocable to debt-financed property, 4 Amount of average acquisition debt, 5 Average adjusted basis, 6 Column 4 divided by column 5, 7 Gross income reportable, 8 Allocable deductions. Includes rows (1) through (4) and a Totals row.

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

		Exempt Controlled Organizations			
1 Name of controlled organization	2 Employer identification number	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)					
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)
<b>Totals</b> .....					

**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)
<b>Totals</b> .....				

**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 25
<b>Totals</b> .....						

**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)						
<b>Totals (carry to Part II, line (5))</b> .....						

**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> . . . . . ▶						
<b>Totals, Part II (lines 1-5)</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 26

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

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

CHRISTUS HEALTH GULF COAST  
 EIN 76-0591592  
 FYE 6-30-20

2019 FORM 990-T, PART II, LINE 30 - NET OPERATING LOSS DEDUCTION

Date Generated Fiscal Year Ended	Expiration Date Fiscal Year Ended	Amount Generated	Amount Previously Utilized	Amount Utilized This Year	Amount Expired	Contribution Converted to NOL	Balance
6/30/2019	∞	146,711					146,711
6/30/2020	∞	0					0
Carryforward to 06/30/20		146,711	0	0	0	0	146,711

CHRISTUS Health Gulf Coast  
 EIN: 76-0591592  
 Year End: 6/30/20

2019 Form 990-T Part III Ln 36 - Net Operating Loss Deduction

Fiscal Year Ended	Expiration Date*	NOL Generated	Amount Previously Utilized	Amount Utilized in Current Year	Amount Expired	Charitable Conversion	Balance
6/30/2001	6/30/2021	1,113,043					1,113,043
6/30/2002	6/30/2022	1,869,777					1,869,777
6/30/2003	6/30/2023	2,304,559					2,304,559
6/30/2004	6/30/2024	1,886,621					1,886,621
6/30/2005	6/30/2025	2,314,508					2,314,508
6/30/2006	6/30/2026	3,071,209					3,071,209
6/30/2007	6/30/2027	178,615					178,615
6/30/2008	6/30/2028	742,031					742,031
6/30/2009	6/30/2029	-					-
6/30/2010	6/30/2030	-					-
6/30/2011	6/30/2031	-					-
6/30/2012	6/30/2032	-					-
6/30/2013	6/30/2033	28,555					28,555
6/30/2014	6/30/2034	-					-
6/30/2015	6/30/2035	-					-
6/30/2016	6/30/2036	-					-
6/30/2017	6/30/2037	-					-
6/30/2018	9/30/2038	-					-
<b>Carryforward to next year</b>		<b>13,508,918</b>					<b>13,508,918</b>

\*Available for use against future Unrelated Business Income. If not utilized, the net operating loss will expire in the fiscal year ended indicated above