Form 990-T
Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))
For calendar year 2017 or other tax year beginning 08/01/17, and ending 07/31/18.
▶ 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. 1545-0087
Public Inspection Copy

Department of the Treasury
Internal Revenue Service

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

Check organization type ▶

501(c) corporation
501(c) trust
401(a) trust
Other trust

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

Albany GA 31703-6801
561499 621500

Group exemption number (See instructions.)

Check organization type ▶

501(c) corporation
501(c) trust
401(a) trust
Other trust

Reference Lab; Retail Sales; Employee parking

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes □ No

The books are in care of ▶ Brian Church, CFO

Telephone number ▶ 229-312-4068

1a Gross receipts or sales
246,005

1c Income (A) Income
2 246,005
3 246,005

2 Gross profit. Subtract line 1 from line 1c
3 Capital gain net income (attach Schedule D)
4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)
4b Capital loss deduction for trusts
4c Income (loss) from partnerships and S corporations (attach statement)
5 Rent Income (Schedule C)
6 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)
7 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)
8 Exploited exempt activity income (Schedule I)
9 Advertising income (Schedule J)
10 Other income (See instructions; attach schedule)
11 Total. Combine lines 3 through 10
12 246,005

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.)

14 Compensation of officers, directors, and trustees (Schedule K)
15 51,696
16 Salaries and wages
17 Repairs and maintenance
18 Bad debts
19 Interest (attach schedule)
20 Taxes and licenses
21 Charitable contributions (See instructions for limitation rules)
22 Depreciation (attach Form 4562)
23 Less depreciation claimed on Schedule A and elsewhere on return
22a 22b 0
24 Depletion
25 Contributions to deferred compensation plans
26 Employee benefit programs
27 Excess exempt expenses (Schedule I)
28 Excess readership costs (Schedule J)
29 Other deductions (attach schedule)
30 Total deductions. Add lines 14 through 28
31 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13
32 Net operating loss deduction (limited to the amount on line 30)
33 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30
34 Specific deduction (Generally $1,000, but see line 33 instructions for exceptions)
35 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32

For Paperwork Reduction Act Notice, see Instructions.

Form 990-T (2017)
### Part III: Tax Computation

35. Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here □ See instructions and:

   a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
      
      $ \begin{array}{ccc} \text{(1)} & \text{(2)} & \text{(3)} \\
      \end{array} 

   b. Enter or computes a share of: Additional 5% (not more than $11,750) □ See instructions
      Additional 5% (not more than $80,000)

   c. Enter income tax on the amount on line 34 from:

36. Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:

37. Proxy tax. See instructions

38. Alternative minimum tax

39. Tax on Non-Compliant Facility Income. See instructions

40. Total. Add lines 37, 38, and 39 to line 35c or 36, whichever applies

### Part IV: Tax and Payments

41a. Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)

41b. Other credits (see instructions)

41c. General business credit. Attach Form 3800 (see instructions)

41d. Credit for prior year minimum tax (attach Form 8801 or 8827)

41e. Total credits. Add lines 41a through 41d

42. Subtract line 41e from line 40

43. Other taxes. Check if from:

   - Form 4256
   - Form 8811
   - Form 8697
   - Form 8862
   - Other (attach schedule)

44. Total tax. Add lines 42 and 43

45a. Payments: A 2016 overpayment credited to 2017

45b. 2017 estimated tax payments

45c. Tax deposited with Form 8888

45d. Foreign organizations: Tax paid or withheld at source (see instructions)

45e. Backup withholding (see instructions)

45f. Credit for small employer health insurance premiums (Attach Form 8941)

45g. Other credits and payments: □ Form 2439

46. Total payments. Add lines 45a through 45g

47. Estimated tax penalty (see instructions). Check if Form 2220 is attached

48. Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed

49. Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

50. Enter the amount of line 49 you want Credited to 2018 estimated tax □ Refunded □

### Part V: Statements Regarding Certain Activities and Other Information (see instructions)

51. At any time during the 2017 calendar year, did the organization have an interest in or a signature or authority 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 here □

52. During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?

   □ Yes □ No

53. Enter the amount of tax-exempt interest received or accrued during the tax year □ $

### Sign Here

Signature of officer □ CFO □

Preparer: Jeffrey S. Wright

Preparer's signature

Paid: Draffin & Tucker LLP

Preparer's EIN: 58-0914992

Use Only: PO Box 71309

Address: Albany, GA 31708-1309

Phone: 229-883-7878

Form 990-T (2017)
### Form 990-T (2017) Phoebe Putney Memorial Hospital, 58-1928247

**Schedule A – Cost of Goods Sold, Enter method of inventory valuation**

<table>
<thead>
<tr>
<th>1 Inventory at beginning of year</th>
<th>6 Inventory at end of year</th>
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<tbody>
<tr>
<td>Purchases</td>
<td></td>
</tr>
<tr>
<td>Cost of labor</td>
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<tr>
<td>Additional costs IRA costs</td>
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<td>(attach schedule)</td>
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<td>Total, add lines 1 through 4b</td>
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**Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)**

(see instructions)

1. Description of property
   1. N/A

2. Rent received or accrued
   - (a) From personal property (if the percentage of rent for personal property is more than 10% 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. Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)

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

**Schedule E – Unrelated Debt-Financed Income**

(see instructions)

1. Description of debt-financed property
   1. N/A

2. Gross income from or allocable to debt-financed property
   6. Column 4 divided by column 5

3. Deductions directly connected with or allocable to debt-financed property
   - (a) Straight line depreciation (attach schedule)
   - (b) Other deductions (attach schedule)

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)

5. Average adjusted basis of or allocable to debt-financed property (attach 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))

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

Total dividends-received deductions included in column 8

Enter here and on page 1, Part I, line 7, column (B).
## Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations
### Exempt Controlled Organizations

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<tbody>
<tr>
<td>1. Name of controlled, organization</td>
<td>2. Employer identification number</td>
<td>3. Net unrelated income (loss) (see instructions)</td>
<td>4. Total of specified payments made</td>
<td>5. Part of column 4 that is included in the controlling organization’s gross income</td>
<td>6. Deductions directly connected with income in column 5</td>
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### Nonexempt Controlled Organizations

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<td>7. Taxable income</td>
<td>8. Net unrelated income (loss) (see instructions)</td>
<td>9. Total of specified payments made</td>
<td>10. Part of column 9 that is included in the controlling organization’s gross income</td>
<td>11. Deductions directly connected with income in column 10</td>
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## Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization

### 1. Description of income

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## Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income

### 1. Description of exploited activity

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## Schedule J – Advertising Income (see instructions)

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

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### Totals (copy to Part II, line (5))

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## 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.)

<table>
<thead>
<tr>
<th>1. Name of periodical</th>
<th>2. Gross advertising income</th>
<th>3. Direct advertising costs</th>
<th>4. Advertising gain or (loss) (col. 2 minus col. 3), if a gain, compute cols. 5 through 7</th>
<th>5. Circulation income</th>
<th>6. Readership costs</th>
<th>7. Excess readership costs (column 6 minus column 5, but not more than column 4).</th>
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<td>(1) N/A</td>
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Totals from Part I

Enter here and on page 1, Part I, line 11, col. (A).

Enter here and on page 1, Part I, line 11, col. (5).

Enter here and on page 1, Part I, line 27.

## Totals, Part II (lines 1-5)

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

<table>
<thead>
<tr>
<th>1. Name</th>
<th>2. Title</th>
<th>3. Percent of time devoted to business</th>
<th>4. Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td>(5) N/A</td>
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Total. Enter here and on page 1, Part II, line 14

Form 990-T (2017)
### Statement 1 - Form 990-T, Part II, Line 28c - Other Deductions

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
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</thead>
<tbody>
<tr>
<td>Supplies - Reference Lab</td>
<td>$3,684</td>
</tr>
<tr>
<td>Direct Dept Cost - Lab</td>
<td>$1,356</td>
</tr>
<tr>
<td>Indirect Dept Cost - Lab</td>
<td>$3,978</td>
</tr>
<tr>
<td>DME - New Foundation</td>
<td>$93,936</td>
</tr>
<tr>
<td>Direct Dept Costs - NF</td>
<td>$12,085</td>
</tr>
<tr>
<td>Indirect Dept Costs - NF</td>
<td>$61,854</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$176,893</strong></td>
</tr>
</tbody>
</table>