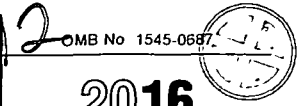


Form 990-T

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



For calendar year 2016 or other tax year beginning 01/01, 2016, and ending 12/31, 2016

Department of the Treasury Internal Revenue Service

Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

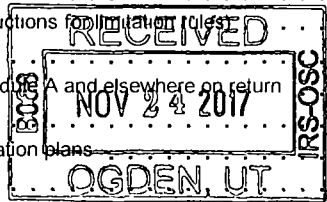
Open to Public Inspection for 501(c)(3) Organizations Only

Form header section including: A Check box if address changed, B Exempt under section (501(c)(3)), C Book value of all assets, D Employer identification number, E Unrelated business activity codes, F Group exemption number, G Check organization type.

Section H: Describe the organization's primary unrelated business activity. Section I: During the tax year, was the corporation a subsidiary in an affiliated group... Section J: The books are in care of JAMES H KELLEY, Telephone number 312-308-3289

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13 including Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-34 including Compensation of officers, directors, and trustees, Salaries and wages, Charitable contributions, Depreciation, etc.



SCANNED FEB 08 2018

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation Controlled group members (sections 1561 and 1563) check here [X] See instructions and
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)
(1) \$ (2) \$ (3) \$
b Enter organization's share of (1) Additional 5% tax (not more than \$11,750). \$
(2) Additional 3% tax (not more than \$100,000) \$
c Income tax on the amount on line 34. ATCH 2. 35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on the amount on line 34 from [] Tax rate schedule or [] Schedule D (Form 1041). 36
37 Proxy tax. See instructions 37
38 Alternative minimum tax 38
39 Tax on Non-Compliant Facility Income. See instructions 39
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies. 40

Part IV Tax and Payments

41 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116). 41a
b Other credits (see instructions). 41b
c General business credit Attach Form 3800 (see instructions) 41c
d Credit for prior year minimum tax (attach Form 8801 or 8827). 41d
e Total credits. Add lines 41a through 41d 41e
42 Subtract line 41e from line 40. 42
43 Other taxes Check if from [] Form 4255 [] Form 8611 [] Form 8697 [] Form 8866 [] Other (attach schedule). 43
44 Total tax. Add lines 42 and 43. 44 0.
45 a Payments A 2015 overpayment credited to 2016 45a
b 2016 estimated tax payments 45b
c Tax deposited with Form 8868. 45c
d Foreign organizations Tax paid or withheld at source (see instructions) 45d
e Backup withholding (see instructions) 45e
f Credit for small employer health insurance premiums (Attach Form 8941) 45f
g Other credits and payments [] Form 2439 [] Form 4136 [] Other Total 45g
46 Total payments Add lines 45a through 45g 46
47 Estimated tax penalty (see instructions) Check if Form 2220 is attached. 47
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed 48
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid 49
50 Enter the amount of line 49 you want Credited to 2017 estimated tax Refunded 50

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

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other 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 [] Yes [X] No
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file [] Yes [X] No
53 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 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

Sign Here JAMES H KELLEY [Signature] 11/13/17 TREASURER
Signature of officer Date Title
May the IRS discuss this return with the preparer shown below (see instructions)? [] Yes [X] No

Paid Preparer Use Only Print/Type preparer's name JACOB J ZEHNDER Preparer's signature [Signature] Date 11/13/17
Check [] if self-employed PTIN P01564049
Firm's name ERNST & YOUNG U.S. LLP Firm's EIN 34-6565596
Firm's address 155 N. WACKER DRIVE, CHICAGO, IL 60606 Phone no 312-879-2000

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

Table with 5 main rows and 2 sub-rows for line 8. Columns include line numbers, descriptions, and Yes/No checkboxes.

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 property descriptions, labeled (1) through (4).

2. Rent received or accrued

Table with 3 columns: (a) From personal property, (b) From real and personal property, and 3(a) Deductions directly connected with the income.

(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 main 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.

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)						
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 (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶						

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

FORM 990T - ORGANIZATIONS TAXABLE AS CORPORATIONS - TAX COMPUTATION

- 1 TAXABLE INCOME FROM LINE 34, PAGE 1, 990-T
- 2 LINE 1 OR THE CORPORATION'S SHARE OF THE \$50,000
TAXABLE INCOME BRACKET, WHICHEVER IS LESS
- 3 SUBTRACT LINE 2 FROM LINE 1
- 4 LINE 3 OR THE CORPORATION'S SHARE OF THE \$25,000
TAXABLE INCOME BRACKET, WHICHEVER IS LESS
- 5 SUBTRACT LINE 4 FROM LINE 3
- 6 LINE 5 OR THE CORPORATION'S SHARE OF THE \$9,925,000
TAXABLE INCOME BRACKET, WHICHEVER IS LESS
- 7 SUBTRACT LINE 6 FROM LINE 5
- 8 ENTER 15% OF LINE 2
- 9 ENTER 25% OF LINE 4
- 10 ENTER 34% OF LINE 6
- 11 ENTER 35% OF LINE 7
- 12 MEMBER'S SHARE OF ADDITIONAL TAX: (A) 5% OF THE
EXCESS OVER \$100,000 OR (B) \$11,750
- 13 MEMBER'S SHARE OF ADDITONAL TAX: (A) 3% OF THE
EXCESS OVER \$15 MILLION OR (B) \$100,000
- 14 TOTAL OF LINES 8 THROUGH 13. ENTER THIS AMOUNT ON
LINE 35C, PAGE 2, 990-T

Presence Healthcare Services
Attachment to Form 990-T - Part II, Line 31
EIN: 36-3330928
Year Ended 12/31/2016

Net Operating Loss Carryover - Regular Tax

Year Ending	NOL Generated	Taxable Income	NOL Utilized	NOL Carryforward
12/31/2011	\$ 416,081	-	\$ 76,060	340,021.00
12/31/2012	\$ 514,382	-	-	514,382.00
12/31/2013	-	76,060.00	-	-
12/31/2014	\$ 149,115	-	-	149,115.00
12/31/2015	\$ 331,802	-	-	331,802.00
12/31/2016	-	-	-	-
NOL Carryforward to 12/31/17:				<u>\$ 1,335,320</u>

Presence Healthcare Services
Attachment to Form 4626 - Line 6
EIN: 36-3330928
Year Ended 12/31/2016

Net Operating Loss Carryover - AMT Tax

Year Ending	NOL		Taxable Income	NOL Utilized	NOL Carryforward
	Generated				
12/31/2011	\$ 416,081		-	68,454.00	347,627.00
12/31/2012	\$ 514,382		-	-	514,382.00
12/31/2013	-		68,454.00	-	-
12/31/2014	\$ 149,115		-	-	149,115.00
12/31/2015	\$ 331,802		-	-	331,802.00
12/31/2016	-		-	-	-
NOL Carryforward to 12/31/17:					<u>\$ 1,342,926</u>