4 4		ENDED TO NOV						
Form 990-T	Exempt Org	anization Bus	siness Inco	me T	ax Return		OMB No 1545-004	47
		(and proxy tax und	er section 6033	3(e))	1011		0046	•
	For calendar year 2019 or other ta	year beginning	, and er	nding	1911	_	2019	j
Department of the Treasury		ww.irs.gov/Form990T for in				-	open to Public Inspec	tion for
Internal Revenue Service	Do not enter SSN nur	nbers on this form as it may	be made public if yo	ur organiz	ation is a 501(c)(3).	5	ió1(c)(3) Organization	s Only
A Check box if	Name of organization	(Check box if name of	changed and see instru	ictions.)			yer identification num byees' trust, see	iber
address changed	D						•	7
B Exempt under section		CLINIC INC.					7-068731 ted business activity	
X 501(c 0 3)	Type I	oom or suite no. If a P.O. bo 169TH STREET	•				structions)	
		province, country, and ZIP o						
408A530(a) 529(a)	OMAHA, NE	68118	ii lureigii pustai cude			5416	510	
Book value of all assets		umber (See instructions.)	>	**	 .			
89,890,5			poration 50	1(c) trust	401(a)	trust	Other t	rust
	organization's unrelated trades		1		the only (or first) un	related		
trade or business here	SEE STATEME	NT 1		If only one,	, complete Parts I-V.	If more t	than one,	
describe the first in the b	ank space at the end of the pre	vious sentence, complete Pa	arts I and II, complete	a Schedule	M for each additiona	al trade o	or	
business, then complete l			· · · · · ·					
	the corporation a subsidiary in		nt-subsidiary controlle	d group?	STMT 4► [X Yes	s No	
	nd identifying number of the pa		lebr 47		39839	00 0	EA 4040	
	► JEFFREY E. Trade or Business I		/A) t		one number > 4			,
	* .	Ticome	(A) Inc	ome	(B) Expenses		(C) Net	$-\!$
1a Gross receipts or sale						ĺ		
b Less returns and allow	•	c Balance	1c	-			-	/
2 Cost of goods sold (S3 Gross profit. Subtract	•		3				/	'
3 Gross profit. Subtract 4a Capital gain net incom			4a		RECEIV	- D		
	4797, Part II, line 17) (attach F	orm 4797)	4b	1 7	12		18/	
c Capital loss deduction		51.11 11 51 y	4c	2	NOV 23 A	120	9 /	
	partnership or an S corporation	(attach statement)	5		HUV D	120	181/	
6 Rent income (Schedu		,	6	1				
	ed income (Schedule E)		7		OGDEN,	UI	Z	
8 Interest, annuities, roy	alties, and rents from a controll	ed organization (Schedule F)	8				, 	
9 Investment income of	a section 501(c)(7), (9), or (17	') organization (Schedule G)	9			\angle		
10 Exploited exempt activ	vity income (Schedule I)		10			\longrightarrow		
11 Advertising income (S	·	ama menuena a	11	015			261 0	1 -
•	di dollono, dildon sonoddio)	STATEMENT 2		,915. ,915.			261,9 261,9	
Part II Deductio	3 through 12 ns Not Taken Elsewh	IAFA /Con instructions fo				L	201,9	15.
	must be directly connected			iuctions)				
14 Compensation of offi	cers, directors, and trustees (S	chedule K)		· · · · · · · · · · · · · · · · · · ·		14		
15 Salaries and wages	0010, 011001010, 0110 1101000 (0	uu				15	230,4	38.
16 Repairs and mainten	ance					16		
17 Bad debts						17		
18 Interest (attach sche	dule) (see instructions)					18		
19 Taxes and licenses						19		
20 Depreciation (attach	Form 4562)			20	14,282.			
21 Less depreciation cla	umed on Schedule A and elsew	ĥere on return	l	21a		21b	14,2	<u>82.</u>
22 Depletion						22		
	rred compensation plans					23	62,2	10
24 Employee benefit pro						24	62,2	10.
25 Excess exempt exper						25		
26 Excess readership co27 Other deductions (at			ÇFE	ያ ያጥልባ	TEMENT 3	26 27	24,1	79.
	dach schedule) 3d lines 14 through 27		JEE	, DIA	LIMIT J	28	331,1	
	axable income before net opera	ting loss deduction. Subtract	t line 28 from line 13			29	-69,2	
	erating loss arising in tax years	-						
(see instructions)	g wireing in tan your	gg e e. site. ealida	, , · · ·			30		0.
<i>_</i> ' ' ' '	axable income. Subtract line 30	from line 29				31	-69,2	02.
	r Paperwork Reduction Act No				961		Form 990-T	(2019)
					UL			_

Form 990-T(2019	Total Unrelated Business Taxabl				4/-0	700/31/ Page 2
	***************************************		unctructions\		32	-69,202.
	f unrelated business taxable income computed fr	om all unrelated trades or dusinesses (see	instructions)	· ·	33	05,202.
	its paid for disallowed fringes	comm c	STMT 7		33	0.
	ble contributions (see instructions for limitation			_		-69,202.
	nrelated business taxable income before pre-2018	•	_	•	35	0.
	tion for net operating loss arising in tax years beg		,	STMT 5	36	-69,202.
	f unrelated business taxable income before speci		•	4	37	
•	c deduction (Generally \$1,000, but see line 38 in:	• •		0	38	1,000.
	ted business taxable income. Subtract line 38 f	rom line 37. If line 38 is greater than line 3	37,	A 1		60 202
	ne smaller of zero or line 37 Tax Computation				39	-69,202.
	zations Taxable as Corporations. Multiply line 3	89 by 21% (0.21)			40	0.
=	Taxable at Trust Rates. See instructions for tax		on line 39 from	-		
	ax rate schedule or Schedule D (Form 1			•	41	
	ax. See instructions	···,			42	
•	tive minimum tax (trusts only)				43	
	Noncompliant Facility Income. See instruction:	,			44	
	Add lines 42, 43, and 44 to line 40 or 41, whicher				45	0.
	Tax and Payments	ver applies			1 40	
		c attach Form 1116)	460		I	
-	n tax credit (corporations attach Form 1118; trust	s allach futili 1110)	46a 46b	*	1	
	redits (see instructions)				1 1	
	I business credit. Attach Form 3800	0007)	46c		1 1	
	for prior year minimum tax (attach Form 8801 or	8827)	46d		١ ,, ١	
	redits. Add lines 46a through 46d				46e	
	ct line 46e from line 45				47	0.
	axes. Check if from: Form 4255 Form 5	orm 8611 Form 8697 Form 8	1866 [] Other (attach schedule)	48	
	ax. Add lines 47 and 48 (see instructions)				49	0.
	et 965 tax liability paid from Form 965-A or Form	1 965-B, Part II, column (k), line 3	1 1	12 176	50	0.
=	nts A 2018 overpayment credited to 2019	ØU.	•	13,176.	1 1	
b 2019 e	stimated tax payments		51b		↓ 1	
c Tax de	posited with Form 8868		51c			
d Foreign	organizations. Tax paid or withheld at source (s	ee instructions)	51d		1 1	
e Backup	withholding (see instructions)		51e		1 1	
f Credit i	for small employer health insurance premiums (a	ttach Form 8941)	51f		1 1	
g Other o	redits, adjustments, and payments: 🔃 Forr	n 2439				
F	orm 4136 Othe	er Total ▶	51g			
52 Total p	ayments. Add lines 51a through 51g				52	13,176.
53 Estima	ted tax penalty (see instructions). Check if Form :	2220 is attached 🕨 🔙			53	
54 Tax du	e. If line 52 is less than the total of lines 49, 50, a	and 53, enter amount owed		.	54	
55 Overpa	yment. If line 52 is larger than the total of lines	19, 50, and 53, enter amount overpaid			55	13,176.
	ne amount of line 55 you want: Credited to 2020			funded 🕨	56	0.
Part VI	Statements Regarding Certain A	ctivities and Other Informati	on (see instruc	ctions)		
57 At any	time during the 2019 calendar year, did the orgai	nization have an interest in or a signature o	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 f	oreign country			
here	>					X
58 During	the tax year, did the organization receive a distril	oution from, or was it the grantor of, or tra	insferor to, a foreig	n trust?		X
If "Yes,	see instructions for other forms the organization	n may have to file.				
59 Enter t	ne amount of tax-exempt interest received or acc	rued during the tax year 🕨 💲				
	nder penalties of perjury, I declare that I have examined thi prect, and complete Declaration of preparer (other than ta			best of my knowled	dge and belie	f, it is true,
Sign	Shoot, and complete Declaration of preparer (other than ta	VICE P	ŘES-FINA	NCE,	av the IRS die	scuss this return with
Here	111 citu	/ /・/ 3. 2020			-	own below (see
	Signature of officer	Date Title		in	structions)?	Yes No
1	Print/Type preparer's name	Preparer's signature C	ate	Check ı	f PTIN	
Paid	7,700	·	1	self- employed		
			1	F - 3		
Preparer	Firm's name			Fırm's EIN ▶	•	
Use Only	Tamo namo P	·······				
	Firm's address			Phone no.		
923711 01-27-20	1	···			F	orm 990-T (2019

Page 3

1 Inventory at beginning of year 2 Purchases 3 Cost of labor 4 Additional section 263A costs (attach schedule) 4 Do ther costs (attach schedule) 5 Total. Add lines 1 through 4b 5 Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 6 O . 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, Iline 2 7 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? X	Schedule A - Cost of Goods	s Sold. Enter	method of invent	ory v	aluation ► N/A	<u> </u>			·-	
3 Cast of labor						ır		6		0.
4a Additional section 263A costs (attach schedule) 4b Other costs (attach schedule) 5 Total Add times 1 through 4b 7 Total A		2		7	Cost of goods sold. St	ubtract i	ine 6			
(attach schedule) b Other outs (attach schedule) 5 Total. Add these 1 through db 5 Total and these 1 through db 6 Total and the 1 Total and personal Property Leased With Real Property) (1) (2) (3) (4) (4) (4) (5) (7) (8) (9) (9) (10) (9) (10)	3 Cost of labor	3			from line 5. Enter here	and in I	Part I,	Ι.	.	
b Other costs (attach schedule) 5 Total Add lines 1 through 4b	4a Additional section 263A costs				line 2			7		
Total. Add lines 1 through 4b 5 the organization? XSchedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions) 1. Description of property (1) (2) (3) (4) 2. Rent received or accrued (a) From personal property (if the percentage of received in the rent is based on profit or income) (rent inc	(attach schedule)	4a		8	Do the rules of section	263A (with respect to		Ye	s No
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(2)	4 Amount of average acquisition debt on or allocable to debt-financed	of or a	allocable to nced property	6	Column 4 divided by column 5		reportable (column		(column 6 x total of	columns
(2)	(1)	<u> </u>	·		%			丁		
(3)								\neg		
(4) Enter here and on page 1, Part I, line 7, column (A) Totals Enter here and on page 1, Part I, line 7, column (B) O • O •								T		
Totals Enter here and on page 1, Part I, line 7, column (A) Enter here and on page 1, Part I, line 7, column (B) O • O •			<u>-</u>		%			\top		-
		•								
	Totals				.	1	0			0.
		ncluded in columi	n 8				<u> </u>	\top		

			,	Exempt Controlled Organizations (see instructions)							
Name of controlled organiza	ition	2. Em identifi num	cation	3. Net unre (loss) (see	elated income instructions)		al of specified nents made	includ	rt of column 4 led in the contr cation's gross i	olling	6. Deductions directly connected with income in column 5
(1)									-		
(2)											
(3)											
(4)				l							
Nonexempt Controlled Organ	ızatıons										
7. Taxable Income		nrelated incom see instructions		9. Total o	of specified payin made	nents	10. Part of colu in the controll gross	mn 9 tha ing orgar s income	nization's		luctions directly connected income in column 10
_(1)											
(2)											
(3)					,						
(4)											
							Add colum Enter here and line 8, a		e 1, Part I, A)	Enter he	d columns 6 and 11 we and on page 1, Part I ine 8, column (B)
Totals				504/ \/7	1 (0) - (<u> </u>			0.		0.
Schedule G - Investme	ent Incon tructions)	ne of a S	section	501(c)(7), (9), or (1	/) Org	anization				
	cription of inco	me			2. Amount of	ncome	3. Deduction directly connection (attach scheduler)	cted	4 Set-	5. Total deductions and set-asides (col 3 plus col 4)	
(1)						1	(,	_		(,
(2)											-
(3)				-							
(4)						·					1
					Enter here and o Part I, line 9 col			-			Enter here and on page 1, Part I, line 9, column (B)
Totals				•		0.1					0.
Schedule I - Exploited (see instri	-	Activity	Incom	e, Other	Than Adv	ertisin	g Income				
Description of exploited activity	unrelated incom	2. Gross unrelated business income from trade or business		openses connected oduction related as income	4. Net incomfrom unrelated business (cominus column gain, compute through	trade or lumn 2 n 3) If a n cols 5	5. Gross inco from activity is not unrela business inco	that ted	6. Exp attributi colur	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)											
(4)											
Totals	Enter her page 1 line 10,	e and on , Part I, col (A)	page	are and on 1, Part I, , col (B)							Enter here and on page 1, Part II, line 25
Schedule J - Advertisi	ng Incor		nstructio		***************************************						
Part I Income From	Periodic	als Repo	orted o	n a Cons	olidated	Basis					
1. Name of periodical	2. Gross advertising gain ame of periodical advertising costs advertising costs advertising costs advertising costs advertising costs advertising costs		ol 2 minus iin, compute	5. Circula income		6. Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)			
(1)											
(2)					╛						
(3)											
(4)					1						
											· · · · · · · · · · · · · · · · · · ·
Totals (carry to Part II, line (5))	_	(0.	0							0.
											Form 990-T (2019

Form 990-T (2019) PHYSICIANS CLINIC INC. 47-06873 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	7. 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	3. 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	PRIMARY	UNRELATED	STATEMENT 1
		BUSINESS ACTIVIT	ΓY		

CONSULTING AND PROFESSIONAL SERVICES

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER	INCOME	STATEMENT 2
DESCRIPTION			AMOUNT
LEASED EMPLOYEES			261,915.
TOTAL TO FORM 990-T, PAGE 1	l, LINE 12		261,915.
FORM 990-T	OTHER	DEDUCTIONS	STATEMENT 3
DESCRIPTION			AMOUNT
SUPPLIES PLANT & EQUIPMENT MISCELLANEOUS EXPENSES			2,919. 20,428. 832.
TOTAL TO FORM 990-T, PAGE 1	l, LINE 27		24,179.

FORM 990-T	NET	OPERATING LOSS D	ATING LOSS DEDUCTION				
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR			
12/31/16 12/31/17	14,366. 6,832.	7,597.	6,769. 6,832.	6,769. 6,832.			
NOL CARRYOV	ER AVAILABLE THIS	YEAR	13,601.	13,601.			
FORM 990-T		CONTRIBUTIONS	CONTRIBUTIONS				
DESCRIPTION	/KIND OF PROPERTY	METHOD USED T	O DETERMINE FMV	AMOUNT			
FOUNDATION GRETNA COMM	ING KADI DS PROJECT THODIST HOSPITAL UNITY FOUNDATION	N/A N/A N/A N/A		2,000. 7,000. 1,250. 8,300. 1,000.			
JENNIE EDMUI HOSPITAL	NDSON MEMORIAL	N/A		500.			
TOTAL TO FO	RM 990-T, PAGE 2,	LINE 34		20,050.			

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 7
	ONTRIBUTIONS SUBJECT TO 100% LIMIT ONTRIBUTIONS SUBJECT TO 25% LIMIT		
CARRYOVER OF FOR TAX YOU FOR TAX Y	EAR 2015 25,767 EAR 2016 33,486 EAR 2017 26,150		
TOTAL CARRY	OVER NT YEAR 10% CONTRIBUTIONS	132,704 20,050	
	IBUTIONS AVAILABLE OME LIMITATION AS ADJUSTED	152,754 0	_
	RIBUTIONS CONTRIBUTIONS S CONTRIBUTIONS	152,754 0 152,754	_
ALLOWABLE C	ONTRIBUTIONS DEDUCTION		0
TOTAL CONTR	IBUTION DEDUCTION		0

4562

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

Depreciation and Amortization (Including Information on Listed Property)

➤ Attach to your tax return.

► Go to www.irs.gov/Form4562 for instructions and the latest information.

Business or activity to which this form relates

990-T

OMB No 1545-0172

	SICIANS CLINIC INC.			FOR	M 9	90-5	r PAGE	1		47-0 <u>68</u> 7317
Part	Election To Expense Certain Proper	ty Under Section 17	'9 Note : If yo	u have any li	sted pr	operty,	, complete Pa	rt V be	efore y	ou complete Part I
1 M	aximum amount (see instructions)			-					1	1,020,000.
2 To	tal cost of section 179 property place	ed in service (see	instructions)						2	<u> </u>
3 Th	reshold cost of section 179 property	before reduction	ın lımıtatıon						3	2,550,000.
4 Re	eduction in limitation. Subtract line 3 f	from line 2 If zero	or less, ente	r -0-					4	
5 Do	lar limitation for tax year Subtract line 4 from line	1 If zero or less, enter -	0- If married filin	g separately see i	nstruction	ns			5	
6	(a) Description of pro	perty		(b) Cost (busin	ness use o	only)	(c) Electe	d cost		
						_				
	sted property Enter the amount from				_	7		-	-	
	tal elected cost of section 179 prope	-	in column (c), lines 6 and	1				8	
-	ntative deduction Enter the smaller		110 Farm 45	20					9 10	
	irryover of disallowed deduction from	-			o) or lir	E			11	
	isiness income limitation. Enter the sr ection 179 expense deduction. Add lir		•			ie 3			12	
	irryover of disallowed deduction to 20				. '' 	13				
	Don't use Part II or Part III below for I									
Part					le listec	prope	erty)			
	ecial depreciation allowance for qual									
•	e tax year			- - · - - · · · · · / / - · ·			3		14	
	operty subject to section 168(f)(1) ele	ction							15	
	her depreciation (including ACRS)								16	14,282.
Part		ınclude listed pro	perty See in	structions)						
			Se	ction A						
17 M	ACRS deductions for assets placed in								1 4- 1	
	ACHS deductions for assets placed if	i service in tax ye	ars beginning	before 2015)		_		17	
	ou are electing to group any assets placed in servi	-	_			k here	▶ [1/	
	·	ce during the tax year in Placed in Servic	to one or more g e During 20	eneral asset accou	unts, chec		▶ [neral Deprec	iation		m
	ou are electing to group any assets placed in servi	ce during the tax year in	e During 20 (c) Basis fo (business/ii	eneral asset accou	unts, chec					m (g) Depreciation deduction
	su are electing to group any assets placed in servi Section B - Assets	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge Recovery			Syste	
18 If y	Section B - Assets (a) Classification of property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge Recovery			Syste	
18 If y	Section B - Assets (a) Classification of property 3-year property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge Recovery			Syste	
18 If y	Section B - Assets (a) Classification of property 3-year property 5-year property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge Recovery			Syste	
18 If y	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge Recovery			Syste	
18 If y 19a b c d	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec	he Ge		on (f) h	Syste	
18 if y 19a b c d e	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property	ce during the tax year in Placed in Servic (b) Month and year placed in service	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, chec Using t (d)	Recovery period	(e) Convention	on (f) N	Syste Method	
19a b c d e f	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property	Placed in Service (b) Month and year placed	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	unts, checulous (d)	Recovery period 5 yrs	(e) Convention	on (f) N	Syste Method S/L S/L	
18 if y 19a b c d e f	Section B - Assets (a) Classification of property 3-year property 7-year property 10-year property 15-year property 20-year property 25-year property	ce during the tax year in Placed in Servic (b) Month and year placed in service	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	(d) (d) 2 2 27 27	Recovery period 5 yrs 5 yrs	(e) Convention MM MM	(f) N	Syste Method S/L S/L S/L	
19a b c d e f	Section B - Assets (a) Classification of property 3-year property 7-year property 10-year property 15-year property 20-year property 25-year property	ce during the tax year in Placed in Servic (b) Month and year placed in service	e During 20 (c) Basis fo (business/ii	eneral asset according Tax Year I	(d) (d) 2 2 27 27	Recovery period 5 yrs	(e) Convention MM MM MM	(f) (h	Syste Method S/L S/L S/L S/L S/L	
19a b c d e f	Section B - Assets Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property	ce during the tax year in Placed in Servic (b) Month and year placed in service // / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 3	5 yrs 5 yrs 9 yrs	(e) Convention MM MM MM MM	(f) h	Syste Method S/L S/L S/L S/L S/L S/L	(g) Depreciation deduction
19a b c d e f g h	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets P	ce during the tax year in Placed in Servic (b) Month and year placed in service // / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 3	5 yrs 5 yrs 9 yrs	(e) Convention MM MM MM MM	ciatio	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property Residential rental property Nonresidential real property Section C - Assets P Class life	ce during the tax year in Placed in Servic (b) Month and year placed in service // / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	(d) (d) 22 27 27 3 sing th	5 yrs 5 yrs 9 yrs	(e) Convention MM MM MM MM	ciatio	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year	ce during the tax year in Placed in Service (b) Month and year placed in service // // // // // // // // // // // // /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 27 3 sing th	5 yrs 5 yrs 9 yrs	(e) Convention MM MM MM MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year	ce during the tax year in Placed in Servic (b) Month and year placed in service // / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 27 3 sing th	5 yrs 5 yrs 9 yrs e Alter	MM MM MM MM MM MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i 20a b c	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year 30-year	ce during the tax year in Placed in Servic (b) Month and year placed in service / / / / / / / / / / / / / / / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 27 3 sing th	5 yrs 5 yrs 9 yrs e Alter 2 yrs 0 yrs	MM MM MM MM MM MM MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i 20a b c d Part	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 12-year 30-year 40-year	ce during the tax year in Placed in Servic (b) Month and year placed in service / / / / / / / / / / / / / / / / / /	eto one or more g e During 20 (c) Basis fo (business/ir only - see	eneral asset accounts Tax Year (appreciation investment use instructions)	2 27 27 3 sing th	5 yrs 5 yrs 9 yrs e Alter 2 yrs 0 yrs	MM MM MM MM MM MM MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i 20a b c d Part	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year 30-year 40-year Summary (See instructions)	ce during the tax year in Placed in Servic (b) Month and year placed in service / / / / / / / / / / / / /	eto one or more g e During 20 (c) Basis for (business/ir only - see	eneral asset accounts Tax Year I respectation investment use instructions) Tax Year U	2 27 27 3 sing th	5 yrs 5 yrs 5 yrs 9 yrs e Alter 2 yrs 0 yrs	MM MM MM MM MM MM MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i 20a b c d Part 21 L: 22 To	Section B - Assets (a) Classification of property 3-year property 5-year property 7-year property 10-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year 30-year 40-year V Summary (See instructions)	ce during the tax year in Placed in Servic (b) Month and year placed in service // // // // // // // // //	es 19 and 20	aneral asset accounty Tax Year I respectation investment use instructions) Tax Year U:	2 27 27 3 sing th	5 yrs 5 yrs 5 yrs 9 yrs 2 yrs 0 yrs 0 yrs	MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction
19a b c d e f g h i 20a b c d Part 21 Lts 22 To Er	Section B - Assets (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Section C - Assets P Class life 12-year 30-year 40-year IV Summary (See instructions) sted property Enter amount from line stal. Add amounts from line 12, lines	ce during the tax year in Placed in Service (b) Month and year placed in service // // // // // // // // // // // 28 14 through 17, lin of your return Pa	es 19 and 20 artnerships a	oneral asset accounts Tax Year II repreciation investment use instructions) Tax Year Use III of the III of th	2 27 27 3 sing th	5 yrs 5 yrs 5 yrs 9 yrs 2 yrs 0 yrs 0 yrs	MM	on (f) N	Syste Method S/L S/L S/L S/L S/L S/L S/L S/L S/L S/	(g) Depreciation deduction

Form 4562 (2019)

PHYSICIANS CLINIC INC.

Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?

Yes No 24b If "Yes," is the evidence written?

(a) (b) (c) (d) (e) (f) (g) (h)

Type of property Date Business/ Cost or (business/investment) (business/investment) (business/investment)

			· · · · · · -					
24a Do you have evidence to	support the bu	siness/investment	use claimed?	Yes N	o 24b lf "Y	es," is the evide	ence written?	Yes No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(g) Method/ Convention	(h) Depreciation deduction	(I) Elected section 179 cost
25 Special depreciation all	owance for q	ualified listed pro	perty placed in s	ervice during the	tax year and	.		
used more than 50% in	a qualified bu	usiness use				25		
26 Property used more tha	ın 50% ın a <u>q</u> ı	ualified business	use					
		%						
		%						
	T .	%		·				
27 Property used 50% or le	ess in a qualif	ied business use)					
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column	(h), lines 25	through 27 Ente	er here and on line	21, page 1		28]
29 Add amounts in column							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30	Total business/investment miles driven during the	(a Veh		(t Veh	•	(c Veh	•	(c Veh	-	(€ Veh	-	(f Veh	
	year (don't include commuting miles)												
	Total commuting miles driven during the year Total other personal (noncommuting) miles								•				
	driven												
33	Total miles driven during the year												
	Add lines 30 through 32												
34	Was the vehicle available for personal use	Yes	No	Yes	No	Yes	No	Yes	No	Yes	<u>No</u>	Yes	No
	during off-duty hours?												
35	Was the vehicle used primarily by a more										i		
	than 5% owner or related person?												
36	Is another vehicle available for personal												
	use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons

37	Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes	No
	employees?		
38	Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your	1 1	
	employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39	Do you treat all use of vehicles by employees as personal use?		
40	Do you provide more than five vehicles to your employees, obtain information from your employees about		
	the use of the vehicles, and retain the information received?		
41	Do you meet the requirements concerning qualified automobile demonstration use?		
	Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles		

Part VI Amortization					
(a) Description of costs	(b) Date amortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization penod or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2	2019 tax year				
	T T				
43 Amortization of costs that began before your 2	43				
44 Total Add amounts in column (f) See the inst	44				