

Form 990-T

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

OMB No 1545-0047

2019

For calendar year 2019 or other tax year beginning 06/01, 2019, and ending 05/31, 2020

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

- A Check box if address changed
B Exempt under section
C Book value of all assets at end of year

Name of organization (SOUTHSIDE MEDICAL CENTER INC)
Number, street, and room or suite no (1046 RIDGE AVENUE, SW)
City or town, state or province, country, and ZIP or foreign postal code (ATLANTA, GA 30315)

D Employer identification number (58-1131002)
E Unrelated business activity code (900099)

F Group exemption number
G Check organization type (501(c) corporation)

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

During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? (No)

The books are in care of (CLAUDIO AZZARITI, CFO) Telephone number (404-564-7009)

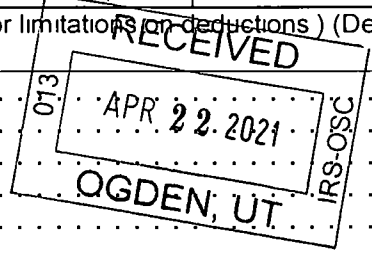
Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, etc.

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

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.

For Paperwork Reduction Act Notice, see instructions. Form 990-T (2019)

SCANNED MAY 06 2022



Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 32 through 39.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 40 through 45.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 46a through 56.

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 57, 58, and 59.

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: Signature of officer, Date (04/06/21), Title (CEO). Includes a box for 'May the IRS discuss this return with the preparer shown below?' with 'Yes' checked.

Paid Preparer Use Only: Preparer's name (KRISTAL K OREACH), Signature, Date (04/01/2021), Firm's name (BKD, LLP), Firm's address (910 E ST LOUIS #200/PO BOX 1190, SPRINGFIELD, MO 65806-2523), Firm's EIN (44-0160260), Phone no (417-865-8701).

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 (with respect to property produced or acquired for resale) apply to the organization?

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

(see instructions)

Table for Schedule C with 3 main sections: 1. Description of property, 2. Rent received or accrued (subdivided into (a) and (b)), 3(a) Deductions directly connected with the income, and (b) Total deductions. Includes a Total row and instructions for entering totals on page 1.

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

Table for Schedule E with 8 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 (subdivided into (a) and (b)), 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 a Totals row and instructions for entering totals on page 1.

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 25
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))						

ATTACHMENT 1

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS OR S CORPORATIONS

SUNCREST HOME HEALTH - SOUTHSIDE, LLC

-741,423.

INCOME (LOSS) FROM PARTNERSHIPS

-741,423.

SOUTHSIDE MEDICAL CENTER
NET OPERATING LOSS CARRYFORWARD
EIN 58-1131002

5/31/2012 NET OPERATING LOSS	86,002
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2013	<u>86,002</u>
5/31/2012 NET OPERATING LOSS CARRYFORWARD	86,002
5/31/2013 NET OPERATING LOSS	<u>198,647</u>
	284,649
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2014	<u>284,649</u>
5/31/2014 NET OPERATING LOSS CARRYFORWARD	284,649
5/31/2014 NET OPERATING LOSS	<u>100,892</u>
	385,541
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2015	<u>385,541</u>
5/31/2015 NET OPERATING LOSS CARRYFORWARD	385,541
5/31/2015 NET OPERATING LOSS	<u>164,272</u>
	549,813
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2016	<u>549,813</u>
5/31/2016 NET OPERATING LOSS CARRYFORWARD	549,813
5/31/2016 NET OPERATING LOSS	<u>75,758</u>
	625,571
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2017	<u>625,571</u>
5/31/2017 NET OPERATING LOSS CARRYFORWARD	625,571
5/31/2017 NET OPERATING LOSS	<u>202,294</u>
	827,865
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2018	<u>827,865</u>
5/31/2018 NET OPERATING LOSS CARRYFORWARD	827,865
5/31/2018 NET OPERATING LOSS	<u>215,573</u>
	1,043,438
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2019	<u>1,043,438</u>
5/31/2019 NET OPERATING LOSS CARRYFORWARD	1,043,438
5/31/2019 NET OPERATING LOSS	<u>109,027</u>
	1,152,465
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2020	<u>1,152,465</u>
5/31/2020 NET OPERATING LOSS CARRYFORWARD	1,152,465
5/31/2020 NET OPERATING LOSS	<u>741,423</u>
	1,893,888
NET OPERATING LOSS UTILIZED ON FORM 990-T	-
CARRYFORWARD TO 5/31/2021	<u>1,893,888</u>