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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable
- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
CHRISTUS HEALTH

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
2707 North Loop West

City or town, state or country, and ZIP + 4
Houston, TX 77008

D Employer identification number
76-0590551

E Telephone number
(281) 936-3000

G Gross receipts $ 465,952,746

F Name and address of principal officer
Ernie Sadau
6363 N Highway 161 Suite 450
Irving, TX 75038

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶ 0928

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ www christushealth org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1999 | M State of legal domicile TX

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
SUPPORTING THE HEALTH CARE MINISTRIES OF THE SPONSORING CONGREGATIONS IN EXTENDING THE HEALING MINISTRY OF JESUS CHRIST IN CONFORMITY WITH THE ETHICAL AND MORAL TEACHINGS OF THE ROMAN CATHOLIC CHURCH

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
5	Total number of employees (Part V, line 2a)	5	2,135
6	Total number of volunteers (estimate if necessary)	6	254
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	1,187,546
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-744,051

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	353,830	101,308
9	Program service revenue (Part VIII, line 2g)	360,857,103	381,343,348
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-30,673,666	66,945,423
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,267,940	6,491,458
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	334,805,207	454,881,537
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,898,925	6,101,976
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	112,228,356	112,591,200
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	284,670,412	356,699,357
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	405,797,693	475,392,533
19	Revenue less expenses Subtract line 18 from line 12	-70,992,486	-20,510,996

Net Assets or Fund Balances		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	2,396,209,601	2,784,239,800
21	Total liabilities (Part X, line 26)	2,279,327,985	2,645,087,421
22	Net assets or fund balances Subtract line 21 from line 20	116,881,616	139,152,379

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Signature of officer | 2011-05-06 Date

▶ JAY S HERRON SR VICE PRESIDENT/ TREASURER
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's identifying number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	ERNST & YOUNG US LLP 1401 MCKINNEY SUITE 1200 HOUSTON, TX 77010		EIN ▶ Phone no ▶ (713) 750-1500

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

THE CORPORATION IS ORGANIZED AND SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, EDUCATIONAL AND RELIGIOUS PURPOSES OF ADVANCING, PROMOTING AND SUPPORTING THE HEALTH CARE MINISTRIES OF THE SPONSORING CONGREGATIONS WHICH OPERATE AND ARE CONTROLLED IN CONFORMITY WITH THE ETHICAL AND MORAL TEACHINGS OF THE ROMAN CATHOLIC CHURCH, AND PROMOTING EFFICIENT GOVERNANCE AND MANAGEMENT, COOPERATIVE PLANNING AND THE SHARING OF RESOURCES AMONG SUCH HEALTH CARE MINISTRIES WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, THE CORPORATION'S MISSION SHALL BE TO EXTEND THE HEALING MINISTRY OF JESUS CHRIST, AND CONSISTENT THEREWITH, SHALL OPERATE ACCORDING TO THE DOCTRINES, RESOLUTIONS, DECREES AND ETHICAL PRINCIPLES OF THE SPONSORING CONGREGATIONS, AND THE ETHICAL AND RELIGIOUS DIRECTORS FOR CATHOLIC HEALTH CARE SERVICES AS PROMULGATED OR AMENDED FROM TIME TO TIME BY THE UNITED STATES CONFERENCE OF CATHOLIC BISHOPS IT IS ALSO A PURPOSE OF THE CORPORATION TO AID, LEND FINANCIAL SUPPORT AND AS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 106,310,169 including grants of $ 0) (Revenue $ 226,730,915)

COMMITMENT TO BENEFITING OUR COMMUNITIES CHRISTUS HEALTH WAS FORMED IN 1999 TO STRENGTHEN THE 142-YEAR-OLD, FAITH-BASED HEALTH CARE MINISTRIES OF THE CONGREGATIONS OF THE SISTERS OF CHARITY OF THE INCARNATE WORD OF HOUSTON AND SAN ANTONIO FOUNDED WITH THE MISSION "TO EXTEND THE HEALING MINISTRY OF JESUS CHRIST," CHRISTUS HEALTH REACHES OUT TO, AND BEYOND, THE MORE THAN 60 COMMUNITIES WE SERVE TO HELP THOSE IN NEED THE VISION OF CHRISTUS HEALTH AS A CATHOLIC, FAITH-BASED MINISTRY, IS TO BE A LEADER, A PARTNER AND ADVOCATE IN THE CREATION OF INNOVATIVE HEALTH AND WELLNESS SOLUTIONS THAT IMPROVE THE LIVES OF INDIVIDUALS AND COMMUNITIES SO THAT ALL MAY EXPERIENCE GOD'S HEALING PRESENCE AND LOVE CHRISTUS HEALTH RESPONDS TO HEALTH CARE NEEDS THROUGH SERVICES PROVIDED IN MORE THAN 350 SERVICES AND FACILITIES, INCLUDING MORE THAN 50 HOSPITALS AND LONG-TERM CARE FACILITIES, 175 CLINICS AND OUTPATIENT CENTERS AND DOZENS OF OTHER HEALTH MINISTRIES AND VENTURES CHRISTUS SERVICES ARE FOUND IN 60 CITIES IN TEXAS, ARKANSAS, IOWA, LOUISIANA, MISSOURI, GEORGIA, NEW MEXICO AND UTAH IN THE U S AND CHIHUAHUA, COAHUILA, NUEVO LEN, PUEBLA, SAN LUIS POTOSI AND TAMAULIPAS IN MEXICO WHILE SPECIFIC PROGRAMS AND SERVICES DIFFER FROM FACILITY TO FACILITY TO MEET COMMUNITY NEEDS, EACH OF OUR HEALTH CARE ENTITIES HAS THE SAME OBJECTIVE -- TO FULFILL OUR MISSION OF EXTENDING THE HEALING MINISTRY OF JESUS CHRIST, WHICH INCLUDES LEADING THE WAY TO A HEALTHIER COMMUNITY CHRISTUS HEALTH PROVIDES VARIOUS ADMINISTRATIVE SERVICES TO THE CHRISTUS REGIONS, INCLUDING EMPLOYEE BENEFITS, WELFARE BENEFITS, COLLECTION SERVICES, COMPUTER SERVICES, INSURANCE, EQUIPMENT MAINTENANCE AND OTHER BUSINESS OFFICE SERVICES COMBINED, THE CHRISTUS HEALTH SERVICE AREA COMPRISES A POPULATION OF APPROXIMATELY 7,611,163 IN OUR FISCAL YEAR 2010 ALONE, WE WERE PRIVILEGED TO SERVE MANY MEMBERS OF OUR COMMUNITIES IN VARIOUS WAYS, INCLUDING 901,386 VISITS TO OUR EMERGENCY DEPARTMENTS, 69,139 INPATIENT SURGERY PROCEDURES, 91,413 OUTPATIENT SURGERY PROCEDURES, 147,439 PATIENTS WHO WERE ADMITTED TO OUR HOSPITALS FOR CARE AND 2,760,040 PATIENTS WHO RECEIVED OUTPATIENT CARE AT OUR FACILITIES TOUCHING THE LIVES OF THE PEOPLE AROUND US IS WHAT MAKES CHRISTUS HEALTH STAND APART ALLOWING OTHERS TO TOUCH US GIVES CHRISTUS HEALTH A VISION FOR THE MEDICALLY NEEDY IN EACH OF THE COMMUNITIES WE SERVE WHETHER IT IS THE LIFE OF A CHILD EXPECTING A FUTURE FILLED WITH MIRACLES, THE LIFE OF A MAN IN NEED OF A CRITICAL HEART SURGERY, OR THE LIFE OF A WOMAN ABOUT TO GIVE BIRTH, CHRISTUS HEALTH'S HOSPITALS, CLINICS AND VARIOUS OTHER HEALTH CARE SERVICES PROVIDE THE BEST CARE POSSIBLE REGARDLESS OF AN INDIVIDUAL'S ABILITY TO PAY BY COLLABORATING WITH COMMUNITIES, CHURCHES, BUSINESSES AND OTHER HEALTH CARE ORGANIZATIONS, CHRISTUS HEALTH'S VARIOUS ENTITIES HAVE STRENGTHENED THEIR ROLES AS MAJOR PROVIDERS OF COMPREHENSIVE, ACCESSIBLE HEALTH CARE SERVICES THESE PARTNERSHIPS WITHIN THE COMMUNITY HAVE BEEN A BLESSING BY HELPING CHRISTUS CARE FOR THOSE IN NEED FURTHERMORE, INVESTMENT IN COMMUNITY SERVICES WOULD NOT BE POSSIBLE WITHOUT OUR DEDICATED EMPLOYEES AND VOLUNTEERS THEY HELP TO BUILD STRONG RELATIONSHIPS BETWEEN THE HOSPITALS AND OTHER HEALTH CARE MINISTRIES AND THE COMMUNITIES, NURTURING CHRISTUS' MISSION TO MEET THE NEEDS OF AND MAKE A DIFFERENCE IN THE LIVES OF OTHERS OUR EMPLOYEES WORK BOTH INSIDE AND OUTSIDE THE WALLS OF OUR HEALTH CARE FACILITIES AND ARE COMMITTED TO REACHING BEYOND THE TRADITIONAL HOSPITAL WALLS TO HELP OUR COMMUNITIES MAINTAIN GOOD HEALTH UNDERSTANDING THE NEED TO PROVIDE ACCESS TO HEALTH CARE TO AS MUCH OF OUR PUBLIC AS POSSIBLE, CHRISTUS HEALTH PARTICIPATES IN GOVERNMENT-SPONSORED HEALTH CARE PROGRAMS INCLUDING MEDICAID, MEDICARE, CHAMPUS, TRICARE AND OTHERS IN ADDITION, WE OFFER SPECIFIC PROGRAMS TO PROVIDE A DISCOUNT ON IMPORTANT SERVICES PROVIDED TO THOSE IN NEED WHO DO NOT HAVE MEDICAL INSURANCE OR WHO DO NOT PARTICIPATE IN GOVERNMENT-SPONSORED PROGRAMS CHRISTUS HEALTH PROVIDES A RANGE OF INPATIENT AND OUTPATIENT SERVICES TO MEET THE NEEDS OF THE COMMUNITIES WE SERVE WE CONDUCT OUR ACTIVITIES AND PROVIDE HEALTH CARE WITHOUT REGARD TO RACE, COLOR, CREED, RELIGION, GENDER, ORIENTATION, DISABILITY, AGE OR NATIONAL ORIGIN PARTICULAR HEALTH CARE SERVICES VARY BY MARKET AND ARE BASED ON THE NEEDS OF EACH PARTICULAR COMMUNITY OUR SERVICES RANGE FROM THE MOST SOPHISTICATED RESEARCH AND BREAKTHROUGH MEDICAL TECHNOLOGY SERVICES TO MUCH-NEEDED PRIMARY CARE EACH OF OUR ACUTE CARE HOSPITALS PROVIDES AN EMERGENCY ROOM THAT IS OPEN TO SERVE ALL THOSE IN NEED OF EMERGENT CARE, REGARDLESS OF THEIR ABILITY TO PAY CHRISTUS ALSO SUPPORTS MANY LOCAL COMMUNITY HEALTH SERVICES IN ADDITION, MANY OF OUR HOSPITALS ARE ENGAGED IN RESEARCH AND CLINICAL TRIALS TO ADVANCE CARE AND CURE FOR CERTAIN DISEASES, AND SOME CHRISTUS HOSPITALS HOST GRADUATE MEDICAL EDUCATION PROGRAMS THAT TRAIN FUTURE HEALTH CARE PROVIDERS AND LEADERS INCLUDING NURSES, PHYSICIANS AND VARIOUS ALLIED HEALTH PROFESSIONALS AS A NOT-FOR-PROFIT ORGANIZATION, A GOVERNING BOARD COMPRISED LARGELY OF INDEPENDENT PROFESSIONALS WHO HELP SHAPE THE STRATEGIES AND POLICIES OF OUR HEALTH SYSTEM GUIDES CHRISTUS HEALTH IN ADDITION, A BOARD OF INDEPENDENT COMMUNITY MEMBERS REPRESENTING THE AREA WE SERVE GOVERNS EACH OF OUR HEALTH CARE ENTITIES WE ARE PRIVILEGED TO HAVE OPEN MEDICAL STAFFS IN EACH OF OUR HOSPITALS AND CLINICS COMPRISED OF QUALIFIED PHYSICIANS WHO WORK WITH US TO PROVIDE CARE TO OUR COMMUNITIES ALL QUALIFIED PHYSICIANS WHO ARE GRANTED PRIVILEGES TO SERVE IN OUR HOSPITALS MUST UNDERGO A THOROUGH AND COMPREHENSIVE CREDENTIALING PROCESS

4b (Code) (Expenses $ 171,411,359 including grants of $ 0) (Revenue $ 154,315,259)

OTHER GOVERNMENT SERVICES IN ADDITION TO THE PROVISION OF CHARITY CARE AND OTHER COMMUNITY SERVICES, CHRISTUS HEALTH PROVIDES SERVICES TO PERSONS COVERED UNDER GOVERNMENT-SPONSORED PROGRAMS INCLUDING MEDICARE, DEPARTMENT OF DEFENSE (DOD) AND TRICARE THE UNREIMBURSED COSTS OF THESE SERVICES ARE REPORTED TO THE STATE OF TEXAS BUT ARE NOT INCLUDED IN REPORTS PREPARED FOLLOWING CATHOLIC HEALTH ASSOCIATION GUIDELINES CHRISTUS HEALTH PROVIDES SERVICES TO PERSONS COVERED UNDER THE FEDERAL MEDICARE PROGRAM, AND IN FACT, THIS IS THE LARGEST SINGLE PAYOR CLASSIFICATION OF PATIENTS SERVED BY THIS HEALTH SYSTEM THE PAYMENT RATE FOR INPATIENT SERVICES IS ON A PER-CASE RATE, CALCULATED BASED ON THE DIAGNOSTIC-RELATED GROUP (DRG) INTO WHICH THE PATIENT IS CATEGORIZED OUTPATIENT SERVICES ARE REIMBURSED BY MEDICARE BASED ON THEIR FEE SCHEDULE CHRISTUS HEALTH DBA US FAMILY HEALTH PLAN ALSO PROVIDES THE UNIFORM MEDICAL BENEFIT FOR 12,210 MILITARY FAMILY MEMBERS UNDER CONTRACT WITH THE DOD UNDER THIS PROGRAM, COMPREHENSIVE MEDICAL SERVICES ARE PROVIDED TO FAMILIES OF ACTIVE DUTY MILITARY PERSONNEL, AND TO RETIREES AND THEIR FAMILIES IN ALL AGE CATEGORIES INCLUDING THOSE OVER AGE 65 CHRISTUS HEALTH ALSO PARTICIPATES IN THE TRICARE STANDARD PROGRAM, AND MANY OF OUR HOSPITALS CONTRACT WITH THE MANAGED CARE SUPPORT CONTRACTOR FOR THE SOUTH REGION TO PROVIDE SERVICES UNDER THE PROVISION OF TRICARE PRIME

4c (Code) (Expenses $ 4,521,828 including grants of $ 4,320,343) (Revenue $ 0)

COMMUNITY SERVICES FOR THE BROADER COMMUNITY THE GREATEST SHARE OF THESE EXPENSES IS FOR EDUCATING HEALTH PROFESSIONALS HELPING TO PREPARE FUTURE HEALTH CARE PROFESSIONALS IS A DISTINGUISHING CHARACTERISTIC OF NOT-FOR-PROFIT HEALTH CARE AND CONSTITUTES A SIGNIFICANT COMMUNITY BENEFIT CHRISTUS HEALTH ALSO USED CASH DONATIONS AS A VEHICLE TO HELP OUR COMMUNITIES WE MADE CASH DONATIONS IN ADDITION TO GRANTS AWARDED THROUGH THE CHRISTUS FUND TO SUPPORT CAUSES LIKE THE FIGHT AGAINST CANCER, PROVISION OF A CONTINUUM OF CARE FOR THE ELDERLY, HIV/AIDS AND FOR MANY OTHER EQUALLY WORTHY PURPOSES DURING FY 2010, CHRISTUS HEALTH ADVOCATED FOR IMPROVING PUBLIC POLICIES, WORKING TO ESTABLISH--AND IN SOME INSTANCES AUGMENT--GRASSROOTS ADVOCACY AND GREATER ACCESS TO HEALTH CARE SERVICES FOR THE CONSTITUENTS WE SERVE

4d Other program services (Describe in Schedule O)
(Expenses $ 1,603,133 including grants of $ 1,603,133) (Revenue $ 0)

4e **Total program service expenses**▶$ 283,846,489

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — **12A** Yes (Yes/No)			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	16	Yes	
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	Yes	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable*	**1a**	1,487			
b	Enter the number of Forms W-2G included in line 1a *Enter -0- if not applicable*	**1b**	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			**1c**	Yes	
2a	Enter the number of employees reported on Form W-3, *Transmittal of Wage and Tax Statements* filed for the calendar year ending with or within the year covered by this return	**2a**	2,135			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			**3a**	Yes	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			**3b**	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	Yes	
b	If "Yes," enter the name of the foreign country ▶CJ, MX See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			**7f**		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			**7g**		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			**7h**		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			**8**		No
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			**9b**		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	**10a**				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	**11a**				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**				

Part VI **Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body	1a 15			
b	Enter the number of voting members that are independent	1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☑ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

Kim Reynolds
2707 North Loop West
Houston, TX 77008
(281) 936-3630

Part VII **Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See add'l data										

1b Total . . . . ▶	8,345,618	143,130	2,255,980

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶297

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	**(B)** Description of services	**(C)** Compensation
CREST SERVICES INC 735 PLAZA BOULVARD SUITE 210 COPPELL, TX 75019	MED EQUIP MAINT	12,779,342
FORSYTHE SOLUTIONS GROUP INC 7770 FRONTAGE ROAD SKOKIE, IL 60077	CONTRACT MAINTENANCE	10,265,872
MCKESSON INFORMATION SOLUTIONS LLC 5995 WINDWARD PKWY ALPHARETTA, GA 30005	INFORMATION SYSTEMS	8,654,722
BROADLANE INC 13727 NOEL ROAD SUITE 1400 DALLAS, TX 75240	PURCHASING AGENTS	8,189,874
MEDICAL INFORMATION TECHNOLOGY INC MEDITECH CIRCLE WESTWOOD, MA 02090	CONTRACT MAINTENANCE	4,014,615

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶141

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a					
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations . . . 1d	51,419				
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	49,889				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f		101,308			
Program Service Revenue			Business Code				
	2a	CAPITATION REVENUE	621,400	154,315,259	154,315,259		
	b	PREMIUM REVENUE	524,298	24,189,255	24,189,255		
	c	SYSTEM OFFICE FEES AND MGMT SERVICES	561,000	40,558,389	40,558,389		
	d	PROGRAM SERVICE RELATED INVEST INCOME	900,099	15,502,748	15,502,748		
	e	SERVICE FEE INCOME	541,900	124,138,058	123,840,884	297,174	
	f	All other program service revenue		22,639,639	22,639,639		
	g	**Total.** Add lines 2a–2f		381,343,348			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		64,858,678			64,858,678
	4	Income from investment of tax-exempt bond proceeds . .		0			
	5	Royalties		938,596			938,596
			(i) Real / (ii) Personal				
	6a	Gross Rents	73,976 /				
	b	Less rental expenses	70,792 /				
	c	Rental income or (loss)	3,184 /				
	d	Net rental income or (loss)		3,184		5,189	-2,005
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	11,266,930 /				
	b	Less cost or other basis and sales expenses	9,180,185 /				
	c	Gain or (loss)	2,086,745 /				
	d	Net gain or (loss)		2,086,745			2,086,745
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . .		0			
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . .		0			
	10a	Gross sales of inventory, less returns and allowances . a	3,408,889				
	b	Less cost of goods sold . . b	1,820,232				
	c	Net income or (loss) from sales of inventory . .		1,588,657			1,588,657
		Miscellaneous Revenue	Business Code				
	11a	CYMETRIX REVENUE	900,099	2,899,284			2,899,284
	b	SPA	812,900	467,146		467,146	
	c	FITNESS CENTER	713,940	266,563		266,563	
	d	All other revenue		328,028		151,474	176,554
	e	**Total.** Add lines 11a–11d		3,961,021			
	12	**Total revenue.** See Instructions . . .		454,881,537	381,046,174	1,187,546	72,546,509

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	5,923,476	5,923,476		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	178,500	178,500		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	7,549,545	3,317,063	4,232,482	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	86,706,315	38,096,381	48,609,934	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	13,913,649	5,045	13,908,604	
9	Other employee benefits	-1,701,007	-6,839,269	5,138,262	
10	Payroll taxes	6,122,698	3,052,886	3,069,812	
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	1,123,520	87,700	1,035,820	
c	Accounting	2,683,027	7,878	2,675,149	
d	Lobbying	220	220		
e	Professional fundraising *See Part IV, line 17* . .	0			
f	Investment management fees	3,523,230		3,523,230	
g	Other	189,645,971	162,223,907	27,422,064	
12	Advertising and promotion	551,134	109,122	442,012	
13	Office expenses	47,507,561	41,854,545	5,653,016	
14	Information technology	0			
15	Royalties . .	0			
16	Occupancy	17,627,677	13,148,108	4,479,569	
17	Travel	3,708,584	1,307,257	2,401,327	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	945,696	220,018	725,678	
20	Interest	28,340,764	7,860	28,332,904	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	10,929,981	3,265,909	7,664,072	
23	Insurance	9,305,017	8,106,769	1,198,248	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	Bond Refinancing Cost	4,399,064		4,399,064	
b	SWAP Financing Cost	17,883,997		17,883,997	
c	Miscellaneous Expenses	10,663,429	1,924,417	8,739,012	
d	USFHP Profit	7,515,865	7,515,865		
e	Other Tax	344,620	332,832	11,788	
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	475,392,533	283,846,489	191,546,044	0
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		0	1	329,743,024
	2	Savings and temporary cash investments		254,700,919	2	336,054,681
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		8,455,749	4	9,241,049
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net		1,110,414,229	7	1,026,322,008
	8	Inventories for sale or use		904,987	8	1,074,187
	9	Prepaid expenses and deferred charges		17,567,519	9	23,051,979
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 156,432,455			
	b	Less accumulated depreciation	10b 58,037,666	90,548,611	10c	98,394,789
	11	Investments—publicly traded securities		324,054,306	11	332,352,199
	12	Investments—other securities See Part IV, line 11		110,695,510	12	128,555,256
	13	Investments—program-related See Part IV, line 11		245,869,315	13	281,439,315
	14	Intangible assets		51,124,176	14	49,041,435
	15	Other assets See Part IV, line 11		181,874,280	15	168,969,878
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		2,396,209,601	16	2,784,239,800
Liabilities	17	Accounts payable and accrued expenses		151,662,363	17	130,727,849
	18	Grants payable			18	
	19	Deferred revenue		696,246	19	501,332
	20	Tax-exempt bond liabilities		1,207,946,976	20	1,035,495,848
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties		0	23	291,354,438
	24	Unsecured notes and loans payable to unrelated third parties		92,197,528	24	0
	25	Other liabilities Complete Part X of Schedule D		826,824,872	25	1,187,007,954
	26	**Total liabilities.** Add lines 17 through 25		2,279,327,985	26	2,645,087,421
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		111,118,904	27	134,344,680
	28	Temporarily restricted net assets		1,108,733	28	431,184
	29	Permanently restricted net assets		4,653,979	29	4,376,515
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		116,881,616	33	139,152,379
	34	Total liabilities and net assets/fund balances		2,396,209,601	34	2,784,239,800

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ____________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☑ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☑ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☑ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
CONG OF SISTERS OF CHARITY OF INCARNATE WORD SAN ANTONIO	742790137	01	Yes		Yes		Yes		141,923,244
CONG OF SISTERS OF CHARITY OF INCARNATE WORD HOUSTON	237152879	01	Yes		Yes		Yes		141,923,245
Total									283,846,489

Part II **Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) **12**

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) **14**

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in IRC 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation
CHRISTUS HEALTH IS EXEMPT UNDER THE GROUP RULING ISSUED TO THE UNITED STATES CONFERENCE OF CATHOLIC BISHOPS WITH RESPECT TO THE FEDERAL TAX STATUS OF CATHOLIC ORGANIZATIONS LISTED IN THE 2010 EDITION OF THE OFFICIAL CATHOLIC DIRECTORY CHRISTUS HEALTH IS A SUPPORTING ORGANIZATION THAT IS ORGANIZED AND OPERATED EXCLUSIVELY FOR THE BENEFIT OF ITS 2 FOUNDING CONGREGATIONS, THE CONGREGATION OF THE SISTERS OF CHARITY OF THE INCARNATE WORD SAN ANTONIO AND THE CONGREGATION OF THE SISTERS OF CHARITY OF THE INCARNATE WORD HOUSTON CHRISTUS HEALTH IS OPERATED, SUPERVISED AND CONTROLLED BY THE SUPPORTED CONGREGATIONS CHRISTUS HEALTH IS INCLUDED IN THE GROUP RULING ISSUED TO THE UNITED STATES CONFERENCE OF CATHOLIC BISHOPS BY THE IRS, WHICH EXEMPTS THE FOLLOWING FROM INCOME TAX UNDER IRC SECTION 501(C)(3) THE AGENCIES AND INSTRUMENTALITIES AND EDUCATIONAL, CHARITABLE, AND RELIGIOUS INSTITUTIONS OPERATED, SUPERVISED OR CONTROLLED BY OR IN CONNECTION WITH THE ROMAN CATHOLIC CHURCH IN THE UNITED STATES, ITS TERRITORIES OR POSSESSIONS APPEARING IN THE OFFICIAL CATHOLIC DIRECTORY CHRISTUS HEALTH IS LISTED IN THE OFFICIAL CATHOLIC DIRECTORY AND IS THEREBY EXEMPT FROM FEDERAL INCOME TAX UNDER IRC 501(C)(3) AND THEREFORE DOES NOT HAVE A DETERMINATION LETTER FROM THE IRS

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
CHRISTUS HEALTH	76-0590551

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	**The lobbying nontaxable amount is:**
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		13,652
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		50,845
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Yes		16,085
i	Other activities? If "Yes," describe in Part IV	Yes		659,695
j	Total lines 1c through 1i			740,277
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
LOBBYING DESCRIPTION		FORM 990, SCHEDULE C, PART II-B HEALTH CARE POLICY IS CRITICAL TO ALL AMERICANS AND CHRISTUS HEALTH BELIEVES THAT HEALTH CARE PROVIDERS MUST PARTICIPATE IN FORMING HEALTH CARE POLICY BY INTERACTING WITH NATIONAL, STATE AND LOCAL REPRESENTATIVES AND THEIR STAFF MEMBERS TO HELP THEM BETTER UNDERSTAND THE COMPLEXITIES AND RAMIFICATIONS OF KEY HEALTH CARE POLICIES SCHEDULE C, PART II-B, LINE 1D 2,572 EMAILS AND FAXES SENT ON BEHALF OF CHRISTUS HEALTH BY EMPLOYEES AS WELL AS VOLUNTEERS REGARDING - PUTTING CARE WITHIN REACH - SUPPORT HEALTH CARE REFORM - 9/18/10 - 660 - STRENGTHEN MEDICARE SYSTEM - 10/20/09 - 801 - HEALTH CARE REFORM VOTED - 11/1/09 - 154 - SENATE VOTES ON HEALTH CARE REFORM - 12/21/09 - 312 - FMAP - 6/8/10 - 318 SCHEDULE C, PART II-B, LINE 1G DURING FY10, CHRISTUS ASSOCIATES ENGAGED IN THE FOLLOWING ACTIVITIES DIRECT CONTACT WITH MEMBERS AND STAFF OF THE LOUISIANA STATE LEGISLATURE, LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS SECRETARY LEVINE AND STAFF, LOUISIANA GOVERNOR BOBBY JINDAL AND STAFF THROUGH EMAILS, PHONE CALLS AND MEETINGS ON ISSUES SUCH AS UPPER PAYMENT LIMITS, MEDICAID, REIMBURSEMENT, CHILDREN'S HEALTH INSURANCE PROGRAM REGIONAL CONTRACTS, SCHOOL BASED HEALTH CLINICS, HEALTHCARE FOR THE UNINSURED, UNCOMPENSATED CARE, NETWORK ADEQUACY, PHYSICIAN ORDER FOR LIFE SUSTAINING TREATMENT, DIRECT CONTACT WITH MEMBERS AND STAFF OF THE TEXAS STATE LEGISLATURE, TEXAS HEALTH AND HUMAN SERVICES COMMISSION STAFF, TEXAS GOVERNOR PERRY STAFF THROUGH EMAILS, PHONE CALLS AND MEETINGS ON ISSUES SUCH AS MEDICAID, FREW PROPOSALS, EMERGENCY PREPAREDNESS, MEDICAID OBESITY PILOT, HEALTH INFORMATION EXCHANGE AND ARRA GRANTS, MEDICAL SCHOOL FUNDING, MEDICAID HEALTH HOME PILOT, DIRECT CONTACT WITH MEMBERS OF THE TEXAS CONGRESSIONAL DELEGATION THROUGH EMAILS, PHONE CALLS AND MEETINGS ON HEALTHCARE REFORM AND FMAP MEDICAID EXTENSION, DIRECT CONTACT WITH MEMBERS OF THE NEW MEXICO STATE LEGISLATORS THROUGH EMAILS, PHONE CALLS AND MEETINGS ON THE ISSUE OF SOLE COMMUNITY PROVIDER FUNDING, MEETINGS WITH MEMBERS OF THE UNITED STATES LEGISLATURE, THE DHS CHIEF MEDICAL OFFICE, THE ASST SECT OF HEALTH AFFAIRS, THE HHS OFFICE OF EMERGENCY PREPAREDNESS, HOMELAND SECURITY STAFF, THE PERUVIAN EMBASSY, THE U S AGENCY FOR INTERNATIONAL DEVELOPMENT, THE U S DEPARTMENT OF COMMERCE/INTERNATIONAL TRADE ADMINISTRATION, AND THE DIRECTOR OF CARIBBEAN INITIATIVE IN REGARD TO DISASTER PREPAREDNESS, HEALTH CARE REFORM, HEALTH INFORMATION TECHNOLOGY, ADOPTION, MEDICAL DIPLOMACY, AND PHYSICIAN ISSUES SCHEDULE C, PART II-B, LINE 1H DURING FY10, A CHRISTUS HEALTH ASSOCIATE ENGAGED IN THE FOLLOWING ACTIVITIES PARTICIPATED IN NATIONAL HIT WEEK BY DEMONSTRATING HEALTH IN THE DIRKSEN SENATE BUILDING, ATTENDED FOUR THSA BOARD MEETINGS IN AUSTIN TEXAS, SPEAKER AT THE ORTIQUE SYMPOSIUM AT SOUTHERN U LAW SCHOOL SPEAKING ABOUT HEALTH IT IN ARRA, ATTENDED HIMSS NATIONAL CONFERENCE IN ATLANTA MARCH, 2010, MET WITH DIRECTOR OF THE CMS INNOVATION CENTER WITH MEMBERS OF THE CONTINUA ALLIANCE TO DISCUSS REMOTE MONITORING AND OTHER HEALTH INFORMATION TECHNOLOGIES, HELD THREE MEETINGS IN WASHINGTON DC WITH MEMBERS OF THE FCC AND USAC STAFF, AND PROVIDED TESTIMONY TO THE MEANINGFUL USE WORKGROUP OF THE HITSPI POLICY COMMITTEE, A COMMITTEE APPOINTED BY ONC FOR DEVELOPING THE MEANINGFUL USE REGULATIONS SCHEDULE C, PART II-B, LINE 1I OTHER LOBBYING ACTIVITIES INCLUDE FEES PAID TO ADVOCACY AND PUBLIC POLICY CONSULTANTS DEDUCATED TO LOBBYING FOR SUCH TOPICS AS HEALTHCARE REIMBURSEMENT ISSUES AND EARMARKS CHRISTUS HEALTH DID NOT SUBSTANTIALLY LOBBYING DURING FISCAL YEAR ENDING 6-30-10 OTHER ACTIVITIES REPORTS THE PORTION OF FY 2010 PROFESSIONAL AND MEMBERSHIP ASSOCIATION DUES ALLOCATED TO LOBBYING EFFORTS BY THE RESPECTIVE ASSOCIATIONS TOTALING $659,695

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047
2009
Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure) ☐ Preservation of an historically importantly land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►______________

4 Number of states where property subject to conservation easement is located ►______________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ►______________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► $ ______________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► $ ______________

(ii) Assets included in Form 990, Part X ► $ ______________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► $ ______________

b Assets included in Form 990, Part X ► $ ______________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange programs

e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI **Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		25,362,384		25,362,384
b Buildings		43,988,494	7,208,588	36,779,906
c Leasehold improvements		12,429,485	3,648,494	8,780,991
d Equipment		69,588,434	45,423,518	24,164,916
e Other		5,063,658	1,757,066	3,306,592
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				98,394,789

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Investment in Subsidiaries	281,439,315	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶	281,439,315	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Security Lending Collateral	49,137,396
Securities Pledged to Creditor	48,656,147
Net Amort Bond Issue Costs	20,689,240
Due from Related Organizations	30,763,822
Executive Benefit Programs	18,973,712
Deposits	749,561
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	168,969,878

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
CMS DUE RELATED ENTITIES- PART XIV	875,066,210
Collections Payable	3,996,076
Payable to CCVI	1,022,912
Pension Liability	217,147,594
Security Lending Agreement	49,565,916
Other Long Term Liabilities	40,209,246
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	1,187,007,954

2. Fin 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
CASH - NON-INTEREST BEARING & SAVINGS & TEMPORARY CASH INVESTMENTS	FORM 990, PART X, LINES 1 AND 2	CHRISTUS HEALTH SYSTEM MAINTAINS A CENTRALIZED CASH MANAGEMENT SYSTEM THIS CASH MANAGEMENT SYSTEM (CMS) INCLUDES A CONCENTRATION ACCOUNT WHEREIN DEPOSITS AND DISBURSEMENTS FOR RELATED CHRISTUS EXEMPT ORGANIZATIONS FLOW THROUGH THIS ACCOUNT AND OVER TO THE MANAGED INVESTMENT ACCOUNTS EACH PARTICIPATING ORGANIZATION REPORTS A BALANCE IN THE CMS REFLECTIVE OF ITS CUMULATIVE CASH ACTIVITY CASH BALANCES FOR EACH CHRISTUS ORGANIZATION ARE REPORTED ON FORM 990 IN ACCORDANCE WITH FINANCIAL STATEMENT REPORTING CMS OWNERSHIP IS MAINTAINED BY CHRISTUS HEALTH (EIN 76-0590551) AND ALL ASSOCIATED INVESTMENT INCOME IS PROPERLY REPORTED ON THE CHRISTUS HEALTH FORM 990
ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V	CHRISTUS HEALTH HAS A 50% INTEREST IN BAPTIST ST ANTHONY HEALTH SYSTEM AND ITS AFFILIATES THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS OF BAPTIST ST ANTHONY HEALTH SYSTEM AND ITS AFFILIATES SHOW ENDOWMENTS INCLUDED IN PERMANENTLY RESTRICTED NET ASSETS THEREFORE, CHRISTUS HEALTH REPORTS 50% OF SUCH ENDOWMENTS ON ITS CONSOLIDATED AUDITED FINANCIAL STATEMENTS HOWEVER, SUCH ENDOWMENTS ARE NOT REPORTED ON THE CHRISTUS HEALTH FORM 990, SCHEDULE D, PART V BECAUSE CHRISTUS HEALTH DOES NOT HAVE A CONTROLLING INTEREST OF BAPTIST ST ANTHONY HEALTH SYSTEM AND ITS AFFILIATES, AND THEREFORE IT IS NOT A RELATED ORGANIZATION PER THE IRS FORM 990 INSTRUCTIONS
UNCERTAIN TAX POSITIONS UNDER FIN 48/ASC 740	FORM 990, SCHEDULE D, PART X	PER FOOTNOTE 3 IN THE CONSOLIDATED FINANCIAL STATEMENTS THERE ARE NO MATERIAL UNRECORDED TAX LIABILITIES AS OF JUNE 30, 2010 AND 2009

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees or agents in region	**(d)** Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for region
Central America and the Caribbean	0	0	Program Services	MED RELIEF EARTHQUAKE	279,283
Central America and the Caribbean	0	0	Program Services	INVESTMENTS	19,500,000
North America	0	0	Program Services	EDUCATION & CONSULTING	211,741
North America	0	0	Grantmaking		178,500
Central America and the Caribbean	0	0	Program Services	SELF INSURANCE FUNDING	23,036,599
North America	0	0	Program Services	Program/Buss Develop	31,771
South America	0	0	Program Services	Program/Buss Develop	15,923
Central America and the Caribbean	0	0	Program Services	Program/Buss Develop	1,909
Europe (Including Iceland and Greenland)	0	0	Program Services	Program/Buss Develop	146
Totals . . . . . ►	0	0			43,255,872

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☐
Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		North America	alcohol and drug rehabilitation program	38,500	WIRE TRANSFR			
		North America	Community Benefit	140,000	WIRE TRANSFR			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ 2

3 Enter total number of other organizations or entities . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Region	**(c)** Number of recipients	**(d)** Amount of cash grant	**(e)** Manner of cash disbursement	**(f)** Amount of non-cash assistance	**(g)** Description of non-cash assistance	**(h)** Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation
ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US	FORM 990, SCHEDULE F, PART I, QUESTION 2	THE ORGANIZATION FOLLOWS CHRISTUS HEALTH MANAGEMENT DIRECTIVE NO 0006, "CONTRIBUTIONS/DONATIONS TO OTHER ORGANIZATIONS" BEFORE ANY DONATION IS MADE, TWO CRITERIA ARE ADDRESSED (1) ORGANIZATION TEST AND (2) IRS TEST THE ORGANIZATION TEST ENSURES THAT DONATIONS ARE EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, EDUCATIONAL, AND RELIGIOUS PURPOSES, AND IN FURTHERANCE OF OUR PURPOSE OF SUPPORTING THE HEALING MINISTRY OF JESUS CHRIST AND ADVANCING, PROMOTING, AND SUPPORTING THE HEALTHCARE MINISTRIES OF THE SPONSORING CONGREGATIONS CONTRIBUTIONS CAN BE MADE TO SUPPORT CHRISTUS SYSTEM MEMBERS AND TO OTHER QUALIFYING TAX-EXEMPT ORGANIZATIONS, PARTICULARLY THOSE DESIGNED TO SUPPORT AND BENEFIT THE POOR AND UNDERSERVED ORGANIZATIONS CONSIDERED FOR DONATIONS MUST BE AN IRS SECTION 501(C)(3) ORGANIZATION AND DOCUMENTATION TO THAT EFFECT OBTAINED TO SATISFY THE IRS TEST, CONTRIBUTIONS GIVEN MUST BE DEDICATED TO ACHIEVING CHARITABLE PURPOSES NOT FOR PERSONAL BENEFIT BUT FOR PUBLIC BENEFIT CONTRIBUTIONS ARE PROHIBITED TO ORGANIZATIONS THAT CONTRIBUTE TO POLITICAL CAMPAIGNS, CANDIDATES FOR OFFICE, OR CONDUCT MORE THAN INCIDENTAL LOBBYING DOCUMENTATION MUST SUPPORT HOW THE DONATION MEETS ORGANIZATIONAL PURPOSES AND FURTHERANCE OF MISSION DONATIONS SHOULD BE MODEST IN SCOPE

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 55

3 Enter total number of other organizations . . . ▶ 0

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
DESCRIPTION OF ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANTS	FORM 990, SCHEDULE I, PART I, QUESTION 2	THE ORGANIZATION FOLLOWS CHRISTUS HEALTH MANAGEMENT DIRECTIVE NO 0006, "CONTRIBUTIONS/DONATIONS TO OTHER ORGANIZATIONS" BEFORE ANY DONATION IS MADE, TWO CRITERIA ARE ADDRESSED (1) ORGANIZATION TEST AND (2) IRS TESTS THE ORGANIZATION TEST ENSURES THAT DONATIONS ARE EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC, EDUCATIONAL, AND RELIGIOUS PURPOSES, AND IN FURTHERANCE OF OUR PURPOSE OF SUPPORTING THE HEALING MINISTRY OF JESUS CHRIST AND ADVANCING, PROMOTING, AND SUPPORTING THE HEALTHCARE MINISTRIES OF THE SPONSORING CONGREGATIONS CONTRIBUTIONS CAN BE MADE TO SUPPORT CHRISTUS SYSTEM MEMBERS AND TO OTHER QUALIFYING TAX-EXEMPT ORGANIZATIONS, PARTICULARLY THOSE DESIGNED TO SUPPORT AND BENEFIT THE POOR AND UNDERSERVED THE ORGANIZATION CONSIDERED FOR DONATIONS MUST BE AN IRS SECTION 501(C)(3) ORGANIZATION AND DOCUMENTATION TO THAT EFFECT OBTAINED TO SATISFY THE IRS TESTS CONTRIBUTIONS GIVEN MUST BE DEDICATED TO ACHIEVING CHARITABLE PURPOSES NOT FOR PERSONAL BENEFIT BUT FOR PUBLIC BENEFIT CONTRIBUTIONS ARE PROHIBITED TO ORGANIZATIONS THAT CONTRIBUTE TO POLITICAL CAMPAIGNS, CANDIDATES FOR OFFICE, OR CONDUCT MORE THAN INCIDENTAL LOBBYING DOCUMENTATION MUST SUPPORT HOW THE DONATION MEETS ORGANIZATIONAL PURPOSES AND FURTHERANCE OF MISSION DONATIONS SHOULD BE MODEST IN SCOPE

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 76-0590551
Name: CHRISTUS HEALTH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
BAPTIST ST ANTHONY HEALTH SYSTEMS1600 WALLACE BLVD AMARILLO,TX 79106	75-0800669	501(c)(3)	18,407				Program support for lower paid associates to increase education level and earning potential through GED, ESL, and mentoring
TEXAS A&M UNIVERSITY SYS HEALTH SCIENCE CTR TAMU-1266 COLLEGE STATION,TX 77843	74-2907553	501(c)(3)	50,000				Care management evaluation program
CHRISTUS HEALTH SOUTHEAST TEXAS3010 HARRISON STREET BEAUMONT,TX 77702	76-0591590	501(c)(3)	37,015				Salary support for Masters-Prepared nurse who serves as Nurse Recruiter and also spends 3 FTE as a Lamar Instructor
CHRISTUS HEALTH SOUTHEAST TEXAS3010 HARRISON STREET BEAUMONT,TX 77702	76-0591590	501(c)(3)	7,500				Nightingale Experience - High school students spend one afternoon and one night on the Lamar campus and subsequent days at St E and St Mary to experience work of nurses
CHRISTUS HEALTH SOUTHEAST TEXAS3010 HARRISON STREET BEAUMONT,TX 77702	76-0591590	501(c)(3)	15,500				Nursing Career Development - Assist with funding for Associates to further their nursing education
CHRISTUS HEALTH SOUTHEAST TEXAS3010 HARRISON STREET BEAUMONT,TX 77702	76-0591590	501(c)(3)	18,600				Nursing Career Development - Assist with funding for Associates to further their nursing education
CHRISTUS HEALTH GULF COASTPO BOX 922037 HOUSTON,TX 77292	76-0591592	501(c)(3)	8,990				School at Work - 8 modules to increase entry level associates skills and knowledge of the health care industry, increase self confidence and self esteem to encourage them to further education
CHRISTUS HEALTH SOUTHWESTERN LOUISIANA524 RYAN STREET LAKE CHARLES,LA 70601	72-0411322	501(c)(3)	27,200				Faculty Teaching Assistants - Funding for 2 teaching assistants to assist local faculty with increasing the number of students accepted to the LVN transition to RN program
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	19,506				Nursing Career Development - Assist with funding for Associates to further their nursing education
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	30,128				Associate Development - Provide 8 associates with tuition, etc to earn a degree in Radiology, Respiratory, Lab, Nursing LVN or RN, or PT Students must agree to work for St Michaels for at least 3 years

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	7,543				School at Work - 8 modules to increase entry level associates skills and knowledge of the health care industry, increase self confidence and self esteem to encourage them to further education
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	12,252				Faculty Teaching Assistants - Funding for 2 teaching assistants to assist local faculty with increasing the number of students accepted to the LVN transition to RN program
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	5,528				Masters of Nursing - Partially fund a faculty position at Texas A&M for a Masters of Nursing program in Administration and Education
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	5,323				Certified Nursing Assistant program
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	13,000				Provide tuition and supplement salary for 2 associates enrolled in Medical Technician or Medical Technologist programs
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	36,079				Health Science Technology Partnership - Spohn partners with 7 school districts to explore careers in health care as well as begin completion of certifications while still ih high school
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	8,833				T E C H Camp - Program support for targeted 11 - 13 year olds who exhibit an interest in health careers
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	19,000				Associate Academy - Comprehensive program to provide GED classes, attend college classes, specialty certifications, or imporve personal knowledge and life skills
CHRISTUS HEALTH CENTRAL LOUISIANA3330 MASONIC DRIVE ALEXANDRIA,LA 71301	72-0408984	501(c)(3)	7,500				Part-Time Nursing Mentor - Salary support for 2 part-time Master's prepared nurses on a PRN basis to assist new nurses in making the transition from new graduate to nurse practicing independently
CHRISTUS HEALTH CENTRAL LOUISIANA3330 MASONIC DRIVE ALEXANDRIA,LA 71301	72-0408984	501(c)(3)	8,512				Part-Time Mentor

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTUS HEALTH CENTRAL LOUISIANA3330 MASONIC DRIVE ALEXANDRIA,LA 71301	72-0408984	501(c)(3)	25,000				Adjunct Faculty for Nursing School - Faculty salary support (1) to LSU to allow for at least 20 additional students in clinicals annually
U OF A FOUNDATION300 EAST 6TH STREET TEXARKANA,AR 71854	71-6056774	501(c)(3)	37,850				Salary support for a nurse practitioner and a medical assistant to provide primary care services to the uninsured population of Texarkana
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	46,500				Care Partners
SABINE VALLEY REGIONAL MHMR1C OAKLAWN TEXARKANA,TX 75501	75-1724017	501(c)(3)	45,750				Operational support for weekend psychiatric crisis response program for emergency departments
SE TX REGIONAL PLANNING COMMISSION 2210 EASTEX FWY BEAUMONT,TX 77703	74-1675043	501(c)(3)	100,000				Operational support for comprehensive care management program for high risk, chronically ill and uninsured individuals in the Hardin, Jefferson, and Orange counties
SAN ANTONIO CHRISTIAN DENTAL CLINIC112 AUDITORIUM CIRCLE SAN ANTONIO,TX 78205	74-1675043	501(c)(3)	40,000				Operational and salary support related to the expansion of SACDC Dental Services to a new dental clinic built at the Haven for Hope homeless transformational campus
BREATH OF LIFE CHILDREN'S CENTER21715 KINGSLAND BLVD KATY,TX 77450	76-0626159	501(c)(3)	40,000				Program support for pediatric primary health care center in Katy, TX
SALVATION ARMYPO BOX 2507 CORPUS CHRISTI,TX 78403	58-0660607	501(c)(3)	10,000				Project Bridge - matching funds to support transitional housing for homeless families
CHRISTUS FOUNDATION FOR HEALTH CAREPO BOX 1919 HOUSTON,TX 77251	75-6074210	501(c)(3)	100,000				Operational support for clinic that provides affordable health services to low-income and uninsured families in community
SE TX REGIONAL PLANNING COMMISSION 2210 EASTEX FWY BEAUMONT,TX 77703	74-1675043	501(c)(3)	50,000				Salary support for Care Navigator

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UBI CARITAS4400 HIGHLAND AVENUE BEAUMONT,TX 77705	78-0558225	501(c)(3)	62,500				Expansion operational support for clinic that provides primary care
TEXAS A&M UNIVERSITY SYS HEALTH SCIENCE CTR TAMU-1266 COLLEGE STATION,TX 77843	74-2907553	501(c)(3)	118,351				Care management evaluation program
CHRISTUS HEALTH CENTRAL LOUISIANA3330 MASONIC DRIVE ALEXANDRIA,LA 71301	72-0408984	501(c)(3)	40,000				Salary support for medical director and other program related services
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	47,000				Program support to expand the Care Management System in Alice, Texas to increase access and implement a fever management program in the Spohn Alice Emergency Department
EL CENTRO DEL BARRIO 2300 W COMMERCE S 300 SAN ANTONIO,TX 78207	74-1787031	501(c)(3)	40,000				Salary support for FQHC to continue to provide healthcare sevices to uninsured/underinsured residents of Bexar county
CHRISTUS HEALTH SOUTHWESTERN LOUISIANA524 RYAN STREET LAKE CHARLES,LA 70601	72-0411322	501(c)(3)	50,000				Care partners program
CH WILKINSON PHYSICIAN NETWORK1700 WEST LOOP SOUTH HOUSTON,TX 77008	75-0422435	501(c)(3)	45,000				Program support for a rural primary health care center in South Texas - Santa Rosa Clinic
EAST TEXAS HEALTH ACCESS NETWORK117 W HOUSTON STREET JASPER,TX 75951	20-0091803	501(c)(3)	80,000				Salary support for care management of uninsured, low-income individuals
NEIGHBOR FOR NEIGHBOR 505 EAST 36TH STREET NORTH TULSA,OK 74106	73-0776404	501(c)(3)	42,000				Interim maintenance and management of diabetes and hypertension until an appropriate referral can be made
CATHOLIC RELIEF SERVICES209 WEST FAYETTE ST BALTIMORE,MD 21298	13-5563422	501(c)(3)	50,000				Emergency relief and long term care recovery work for Haiti

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	37,000				Program support for care management of uninsured, low-income individuals
NEW BRAUNFELS CHRISTIAN MINISTRIES 2154 LOOP 337N NEW BRAUNFELS,TX 78130	74-2252462	501(c)(3)	50,000				Operational support for a new clinic providing free medical care to uninsured in Comal County
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	50,000				Program and salary support for a Mental Health Case Worker and Community Mental Health Technician
U OF A FOUNDATION300 EAST 6TH STREET TEXARKANA,AR 71854	71-6056774	501(c)(3)	45,000				Community Clinic that provide primary care services to the uninsured population of Texarkana
COMMUNITY ACTION CORP OF SOUTH TEXAS 204 E FIRST STREET ALICE,TX 78332	74-1679824	501(c)(3)	36,560				Salary and program support for collaboration to improve the health of low-income and uninsured populations
AMISTAD COMMUNITY HEALTH CENTER INC1533 BROWNLEE BLVD CORPUS CHRISTI,TX 78404	20-3008507	501(c)(3)	30,000				Salary support for community based health center to provide sliding scale pediatric services
CHRISTUS SANTA ROSA HEALTHCARE CORP333 N SANTA ROSA SAN ANTONIO,TX 78207	74-1109665	501(c)(3)	42,264				Operational support for care management program that assist uninsured low-income individuals with acquisition of primary health care services and community resources
CHRISTUS HEALTH ARK-LA-TEX2600 ST MICHAEL DRIVE TEXARKANA,TX 75503	75-2796815	501(c)(3)	37,827				Clinical Geriatric Neurology or Orthopedics - Continued educational seminars for therapists
CHRISTUS HEALTH CENTRAL LOUISIANA3330 MASONIC DRIVE ALEXANDRIA,LA 71301	72-0408984	501(c)(3)	37,500				Salary support for care management of uninsured, low-income individuals
CHRISTUS FOUNDATION FOR HEALTH CAREPO BOX 1919 HOUSTON,TX 77251	75-6074210	501(c)(3)	50,000				Salary support for health services and health education offered on school campuses to improve student health and school attendance

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOLY CROSS MINISTRIES 860 EAST 4500 SOUTH SALT LAKE CITY, UT 84107	87-0359324	501(c)(3)	20,000				Operational support for care management program that assist uninsured low-income individuals with acquisition of primary health care services and community resources
CHRISTUS HEALTH GULF COASTPO BOX 922037 HOUSTON, TX 77292	76-0591592	501(c)(3)	39,552				Salary support for navigator to facilitate access to community promary healthc are services and resources for the uninsured/underinsured patients who access hospital emergency rooms
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI, TX 78404	74-1109836	501(c)(3)	44,280				Operational support for care management program that assist uninsured low-income individuals with acquisition of primary health care services and community resources
CATHOLIC CHARITIES OF SE TEXASPO BOX 829 BEAUMONT, TX 77704	74-1900345	501(c)(3)	30,550				Salary support for a housing case manager for low and moderate-income families effected by hurricanes Rita and Katrina
COMMUNITY ACTION CORP OF SOUTH TEXAS 204 E FIRST STREET ALICE, TX 78332	74-1679824	501(c)(3)	40,000				Operation and salary support for collaboration to improve the health of low-income and uninsured populations in Brooks, Jim Wells, and Kleberg counties through innovative programs, training and capacity building
NATIONAL CHILD LABOR 1501 BROADWAY STE 1908 NEW YORK, NY 10036	13-5562999	501(c)(3)	50,000				School Based Health Centers
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI, TX 78404	74-1109836	501(c)(3)	36,000				Operational and salary support for collaboration to improve the health of low-income and uninsured populations in Brooks, Jim Wells, and Kleberg counties through innovative programs, training, and capacity building
MARTIN LUTHER KING HEALTH CENTER INC1233 SPRAGUE ST SHREVEPORT, LA 71101	72-1079721	501(c)(3)	50,000				Program support for care management of uninsured, low-income individuals
GRAND PRAIRIE WELLNESS CENTER1710 SMALL STREET GRAND PRAIRIE, TX 75050	75-2877107	501(c)(3)	15,000				Salary support for primary care health center
GRACE-GRAPEVINE RELIEF AND COMMUNITY EXCHPO BOX 412 GRAPEVINE, TX 76099	75-2197502	501(c)(3)	15,000				Salary support for clinic in northeast Tarrant County that provides healthcare services to the underinsured and uninsured

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHRISTUS SPOHN HEALTH SYSTEM DEVELOPMENT FND600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1906005	501(c)(3)	7,500				Award sponsor -fight cancer
CANCER RESEARCH AND PREVENTION FOUNDATIONPO BOX 12361 AUSTIN,TX 78711	52-1429544	501(c)(3)	10,000				Champion Award presented to Senator Jane Nelson-Sponorship cancer prevention
THE FRIENDS OF STEHLIN FOUNDATION10301 STELLA LINK HOUSTON,TX 77025	74-2200613	501(c)(3)	10,000				Sponsorship supporting cancer research
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	8,592				Donation to support volunteer services
CATHOLIC MEDICAL MISSION BOARD1725 I STREET NW STE 413 WASHINGTON,DC 20006	13-5602319	501(c)(3)	116,000				Donation to help the Peruvian people in the catchment area of services
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION 600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	10,000				Platinum Sponsorship - 2010 Designated Project
HAL SUTTON FOUNDATION 212 TEXAS ST STE 100 SHREVEPORT,LA 71101	74-1490697	501(c)(3)	15,000				Gold Sponorship - benefiting Sutton's Children Hospital
CHRISTUS HEALTH UTAH 451 BISHOP FED LN SALT LAKE CITY,UT 84115	87-0231682	501(c)(3)	10,000				Patron level donation that supports the Hope Benefit -Charity Care program
ST JOSEPH COMMUNITY FOUNDATION2800 LAMAR AVE CAP 1 2 FLR PARIS,TX 75460	42-1619230	501(c)(3)	15,000				Sponsorship for Heart of Paris Gala 2010 to support healthcare services in Paris, Tx
CHRISTUS SANTA ROSA HEALTH CARE CORPORATION333 N SANTA ROSE ST SAN ANTONIO,TX 78207	74-1109665	501(c)(3)	12,015				Support Santa Rosa auxiliary

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION OF THE SISTERS OF CHARITY-HOUSTON6510 LAWNDALE HOUSTON,TX 77023	23-7152879	501(c)(3)	2,097,426				Support mission
CONGREGATION OF THE SISTERS OF CHARITY-SAN ANT4503 BROADWAY SAN ANTONIO,TX 78209	74-1676917	501(c)(3)	1,037,532				Support mission
CHRISTUS HEALTH FOUNDATION OF SOUTHEAST TEXAS2830 CALDER BEAUMONT,TX 77702	76-0136274	501(c)(3)	15,000				Renovation NICU St Elizabeth and Pediatric Unit St Mary Purchase fetal monitoring system Japser Memorial
CHRISTUS FOUNDATION FOR HEALTH CAREPO BOX 1919 HOUSTON,TX 77251	75-6074210	501(c)(3)	10,000				Supporting children's health programs
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	90,000				health care program support
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	7,355				support hospital volunteer services
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	32,547				support hospital volunteer services
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	14,506				support hospital volunteer services
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	15,093				support hospital volunteer services-Kleberg
CHRISTUS SPOHN HEALTH SYSTEM CORPORATION600 ELIZABETH ST CORPUS CHRISTI,TX 78404	74-1109836	501(c)(3)	15,126				health care program support

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ST VINCENT HOSPITALPO BOX 2107 SANTA FE,NM 87504	85-0106941	501(c)(3)	72,941				health care program support

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Travel for companions ☑ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO /Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO /Executive Director Check all that apply ☑ Compensation committee ☑ Independent compensation consultant ☐ Form 990 of other organizations ☑ Written employment contract ☑ Compensation survey or study ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
SUPPLEMENTAL COMPENSATION INFORMATION	FORM 990, PART VII, QUESTION 1A AND SCHEDULE J, PART II	DIRECTORS AND EX-OFFICIO DIRECTORS PROVIDE THEIR SERVICES AS MEMBERS OF THE BOARD WITHOUT COMPENSATION OR BENEFITS ANY COMPENSATION AND BENEFITS DISCLOSED FOR SUCH PERSONS IS EARNED IN THE RESPECTIVE INDIVIDUAL'S ROLE AS AN OFFICER OR EMPLOYEE OF THE ORGANIZATION, NOT FOR THE INDIVIDUAL'S ROLE AS A BOARD MEMBER OR DIRECTOR OFFICERS, KEY EMPLOYEES AND HIGHEST PAID EMPLOYEES ARE FULL-TIME EMPLOYEES BOARD MEMBERS SPEND TIME AS NEEDED FOR BOARD MEETINGS AND FUNCTIONS
QUESTIONS REGARDING COMPENSATION	FORM 990, SCHEDULE J, PART I, QUESTIONS 1-2	DARRELL DIXON RECEIVED $3,009 IN TAX ASSISTANCE FOR RELOCATION THOMAS ROYER, MD RECEIVED $350 FOR TRAVEL FOR COMPANIONS
DETERMINATION OF CEO/EXECUTIVE DIRECTOR'S COMPENSATION	FORM 990, SCHEDULE J, PART I, QUESTION 3	CHRISTUS HEALTH USES AN EXECUTIVE COMPENSATION COMMITTEE TO ESTABLISH AND APPROVE THE COMPENSATION OF THE FILING ORGANIZATION'S CEO/EXECUTIVE DIRECTOR THIS COMMITTEE USES AN INDEPENDENT COMPENSATION CONSULTANT WHO PERFORMS BI-ANNUAL COMPENSATION SURVEY THE CEO HAS A WRITTEN EMPLOYMENT CONTRACT WITH THE FILING ORGANIZATION
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	FORM 990, SCHEDULE J, PART I, QUESTION 4	DEFERRED COMPENSATION INCLUDES EXECUTIVE DEFERRED INCOME ACCOUNT, SUPPLEMENTAL EXECUTIVE RETIREMENT AND RETENTION PLAN, AND PENSION RESTORATION PLAN ESTIMATED PENSION BENEFITS WERE CALCULATED BASED ON THE PROVISIONS OF THE CURRENT PENSION RESTORATION PLAN AT 6% OF PENSIONABLE EARNINGS WHICH ARE OVER THE IRS LEGISLATIVE COMPENSATION LIMIT SOME ASSOCIATES ARE GRANDFATHERED UNDER AN EARLIER LEGACY PENSION PLAN IF A PARTICIPANT HAS PROTECTED PENSION BENEFITS UNDER SUCH LEGACY PLANS, HIS/HER PERCENTAGE IS ZERO UNDER THE SUPPLEMENTAL EXECUTIVE RETIREMENT AND RETENTION PLAN, AS THE PROTECTED BENEFIT IS ALREADY EQUAL TO OR BETTER THAN CURRENT MARKET
RECEIVE PAYMENT FROM SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	FORM 990, SCHEDULE J, PART I, QUESTION 4B	THOMAS ROYER, MD WAS PAID $139,077 DURING CALENDAR YEAR 2009 UNDER A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN MARY LYNCH WAS PAID $99,539 DURING CALENDAR YEAR 2009 UNDER A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN MARSHALL BOLYARD WAS PAID $11,579 DURING CALENDAR YEAR 2009 UNDER A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN DARRELL DIXON WAS PAID $74,387 DURING CALENDAR YEAR 2009 UNDER A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN PATRICIA SAMPANES WAS PAID $13,185 DURING CALENDAR YEAR 2009 UNDER A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN
SUPPLEMENTAL COMPENSATION INFORMATION	FORM 990, SCHEDULE J, PART II	W-2 COMPENSATION MAY INCLUDE PAYMENTS RELATED TO COMPENSATION DEFERRED IN PRIOR YEARS DEFERRED COMPENSATION MAY INCLUDE DEFERRALS OF CURRENT YEAR COMPENSATION UNDER EXECUTIVE DEFERRED INCOME ACCOUNT, SUPPLEMENTAL EXECUTIVE RETIREMENT AND RETENTION PLAN AND PENSION RESTORATION PLAN COMPENSATION FOR DR THOMAS ROYER INCLUDES PAYMENTS FROM EXECUTIVE DEFERRED INCOME ACCOUNT, SUPPLEMENTAL EXECUTIVE RETENTION AND RETIREMENT PLAN AND PENSION RESTORATION PLAN EARNED AND PAID IN 2009 UNDER TERMS OF THE AFOREMENTIONED PLANS COMPENSATION FOR MARY LYNCH INCLUDES PAYMENTS FROM EXECUTIVE DEFERRED INCOME ACCOUNT and SUPPLEMENTAL EXECUTIVE RETENTION AND RETIREMENT PLAN EARNED AND PAID IN 2009 UNDER TERMS OF THE AFOREMENTIONED PLANS COMPENSATION FOR MARSHALL BOLYARD INCLUDES PAYMENTS FROM SUPPLEMENTAL EXECUTIVE RETENTION AND RETIREMENT PLAN EARNED AND PAID IN 2009 UNDER TERMS OF THE AFOREMENTIONED PLAN COMPENSATION FOR DARRELL DIXON INCLUDES PAYMENTS FROM EXECUTIVE DEFERRED INCOME ACCOUNT and SUPPLEMENTAL EXECUTIVE RETENTION AND RETIREMENT PLAN EARNED AND PAID IN 2009 UNDER TERMS OF THE AFOREMENTIONED PLANS COMPENSATION FOR PATRICIA SAMPANES INCLUDES PAYMENTS FROM EXECUTIVE DEFERRED INCOME ACCOUNT, SUPPLEMENTAL EXECUTIVE RETENTION AND RETIREMENT PLAN AND PENSION RESTORATION PLAN EARNED AND PAID IN 2009 UNDER TERMS OF THE AFOREMENTIONED PLANS COMPENSATION FOR THE FOLLOWING PEOPLE INCLUDES PAYMENTS FROM EXECUTIVE DEFERRED INCOME ACCOUNT VESTED AND DUE IN 2009 UNDER TERMS OF THE PLAN John Gillean, MD, Linda McClung, Ernie Sadau, Jeffrey Puckett, Stephen Barnabee and Scott Weber
BONUS AND INCENTIVE COMPENSATION	FORM 990, SCHEDULE J, PART II, COLUMN B(II)	BONUS AND INCENTIVE COMPENSATION INCLUDES AMOUNTS THAT WERE DEFERRED IN A PRIOR YEAR BUT PAID OUT IN CALENDAR YEAR 2009
DEFERRED COMPENSATION	FORM 990, SCHEDULE J, PART II, COLUMN C	DEFERRED COMPENSATION INCLUDES EXECUTIVE DEFERRED INCOME ACCOUNT, SUPPLEMENTAL EXECUTIVE RETIREMENT AND RETENTION PLAN, EMPLOYER CONTRIBUTION TO 403(B) MATCHED SAVINGS PLAN, PENSION RESTORATION PLAN AND ESTIMATED PENSION BENEFITS UNDER CHRISTUS HEALTH CASH BALANCE PLAN ESTIMATED PENSION BENEFITS WERE CALCULATED BASED ON THE PROVISIONS OF THE CURRENT CASH BALANCE PLAN AT 6% OF PENSIONABLE EARNINGS SOME ASSOCIATES ARE GRANDFATHERED UNDER AN EARLIER PENSION PLAN THESE GRANDFATHERED PARTICIPANTS, BASED ON COMPUTATION AT THE TIME OF THEIR RETIREMENT, WILL RECEIVE THE LARGER OF THE RETIREMENT BENEFIT COMPUTED UNDER THE CASH BALANCE PLAN COMPARED TO THE PREVIOUS PENSION PLAN DUE TO THE COMPLEXITY OF CALCULATING AN ACCURATE BENEFIT COST FOR GRANDFATHERED PARTICIPANTS, THE FORM 990 REPORTS AS PENSION BENEFITS THEIR ANNUAL ESTIMATED CASH BALANCE PLAN ACCRUAL

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 76-0590551
Name: CHRISTUS HEALTH

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
THOMAS C ROYER MD	(i)	1,106,893	0	902,817	129,862	25,774	2,165,346	0
	(ii)	0	0	0	0	0	0	0
GEORGE S CONKLIN	(i)	344,363	0	391	178,546	21,605	544,905	0
	(ii)	0	0	0	0	0	0	0
JOHN GILLEAN MD	(i)	453,972	0	28,088	155,540	27,284	664,884	0
	(ii)	0	0	0	0	0	0	0
GERARD F HEELEY	(i)	247,226	0	9,000	67,687	9,496	333,409	0
	(ii)	0	0	0	0	0	0	0
JAY S HERRON	(i)	504,541	0	9,191	179,344	19,719	712,795	0
	(ii)	0	0	0	0	0	0	0
MARY T LYNCH	(i)	324,489	0	342,009	108,721	11,282	786,501	0
	(ii)	0	0	0	0	0	0	0
PETER F MADDOX	(i)	362,260	0	11,705	187,686	23,339	584,990	0
	(ii)	0	0	0	0	0	0	0
LINDA K MCCLUNG	(i)	322,608	0	21,046	97,521	25,972	467,147	0
	(ii)	0	0	0	0	0	0	0
ERNIE W SADAU	(i)	696,687	0	65,902	231,323	25,763	1,019,675	0
	(ii)	0	0	0	0	0	0	0
JOHN L ZIPPRICH	(i)	421,509	0	9,200	145,540	7,904	584,153	0
	(ii)	0	0	0	0	0	0	0
JEFFREY M PUCKETT	(i)	372,708	0	28,501	87,012	18,111	506,332	0
	(ii)	0	0	0	0	0	0	0
MARSHALL BOLYARD	(i)	193,756	40,589	11,597	59,462	1,064	306,468	0
	(ii)	0	0	0	0	0	0	0
STEPHEN BARNABEE	(i)	214,976	0	22,075	22,884	7,820	267,755	0
	(ii)	0	0	0	0	0	0	0
DARRELL DIXON	(i)	277,599	0	109,953	85,866	40,412	513,830	0
	(ii)	0	0	0	0	0	0	0
DONNA MIKULECKY	(i)	120,202	22,828	100	42,440	1,665	187,235	0
	(ii)	120,202	22,828	100	42,440	1,665	187,235	0
PATRICIA SAMPANES	(i)	206,623	0	40,695	25,099	18,289	290,706	0
	(ii)	0	0	0	0	0	0	0
SCOTT WEBER	(i)	229,827	0	5,985	62,238	14,711	312,761	0
	(ii)	0	0	0	0	0	0	0

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Schedule K (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased Yes	(g) Defeased No	(h) On Behalf of Issuer Yes	(h) On Behalf of Issuer No
A	HARRIS COUNTY HEALTH FACILITIES DEV CORP	52-1284201	41315RFV1	11-08-2005	320,620,000	See Schedule O		X		X
B	HARRIS COUNTY HEALTH FACILITIES DEV CORP	52-1284201	41315RFX7	09-17-2007	96,650,000	See Schedule O		X		X
C	COASTAL BEND HEALTH FACILITIES DEVELOP CORP	74-2352502	19042FAB2	11-08-2005	61,300,000	See Schedule O		X		X
D	LOUISIANA PUBLIC FACILITIES AUTHORITY	72-0895871	546398E87	12-03-2009	56,725,518	See Schedule O		X		X
E	LOUISIANA PUBLIC FACILITIES AUTHORITY	72-0895871	546398ZM3	11-25-2008	44,382,370	See Schedule O		X		X

Part II Proceeds

		A	B	C	D	E
1	Total proceeds of issue	320,639,924	106,785,694	62,856,640	56,736,658	44,434,994
2	Gross proceeds in reserve funds	0	0	0	0	4,037,473
3	Proceeds in refunding or defeasance escrows	0	0	0	0	0
4	Other unspent proceeds	0	0	0	0	0
5	Issuance costs from proceeds	6,416,252	0	1,285,000	0	1,350,604
6	Working capital expenditures from proceeds	0	0	0	0	0
7	Capital expenditures from proceeds	3,624,407	0	18,182,274	0	0
8	Year of substantial completion	2009				

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
9	Were the bonds issued as part of a current refunding issue?		X	X		X		X		X	
10	Were the bonds issued as part of an advance refunding issue?	X			X		X		X		X
11	Has the final allocation of proceeds been made?		X		X		X	X			X
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X		X		X		X	

Part III Private Business Use

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X		X		X		X
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X		X		X		X

Part III Private Business Use *(Continued)*

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X		X	X			X		X
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X		X		X		X
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X		X		X		X		X	
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %		0 %		0 %		0 %		0 %	
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %		0 %		0 %		0 %		0 %	
6	Total of lines 4 and 5	0 %		0 %		0 %		0 %		0 %	
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X		X		X		X	

Part IV Arbitrage

		A Yes	A No	B Yes	B No	C Yes	C No	D Yes	D No	E Yes	E No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X		X		X		X
2	Is the bond issue a variable rate issue?	X		X		X			X		X
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?	X			X	X			X		X
b	Name of provider	CITIBANK NA				CITIBANK NA					
c	Term of hedge	31 7				31 7					
4a	Were gross proceeds invested in a GIC?		X		X		X		X		X
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X	X		X			X		X
6	Did the bond issue qualify for an exception to rebate?		X	X			X	X		X	

Additional Data

Software ID:
Software Version:
EIN: 76-0590551
Name: CHRISTUS HEALTH

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493133053721

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Identifier	Return Reference	Explanation
DESCRIPTION OF OTHER PROGRAM SERVICES	FORM 990, PART III, LINE 4D	COMMUNITY SERVICES - UNDERSERVED ROOTED IN OUR MISSION AND TRADITION, THE FOUNDERS AND SPONSORS OF CHRISTUS HEALTH AND THOSE WHO CO-MINISTER WITH THEM SEEK NEW AND INNOVATIVE WAYS OF DELIVERING QUALITY HEATH CARE THAT IS BOTH AFFORDABLE AND ACCESSIBLE TO ALL TODAY, MORE THAN EVER, WE MUST AIM TO IMPROVE THE TOTAL HEALTH STATUS OF THE COMMUNITY THROUGH PROGRAMS THAT PLACE OUR SERVICES WHERE THEY ARE NEEDED MOST, WITH SPECIAL ATTENTION AND PREFERENCE GIVEN TO PROGRAMS THAT SUPPORT AND BENEFIT THE HEALTH AND WELFARE OF THE POOR AND UNDERSERVED COMMUNITY SERVICES FOR THE POOR AND UNDERSERVED REPRESENT THE UNPAID COST OF SERVICES PROVIDED FOR WHICH A PATIENT IS NOT BILLED, OR FOR WHICH A FEE HAS BEEN ASSESSED THAT RECOVERS ONLY A PORTION OF THE COST OF THE RENDERED SERVICE THIS CATEGORY INCLUDES INITIATIVES THAT REACH OUT TO THOSE IN NEED THROUGH COMMUNITY HEALTH AND SOCIAL PROGRAMS THESE PROGRAMS SEEK JUSTICE FOR THE VULNERABLE AND WORK TO BRING ABOUT CHANGES IN OUR POLITICAL AND ECONOMIC SYSTEMS THE PROGRAMS COVER A BROAD SPECTRUM OF SERVICES FROM COMMUNITY CLINICS TO IMMUNIZATIONS FOR CHILDREN AND SENIORS, MEALS ON WHEELS, TRANSPORTATION SERVICES, HOME REPAIR PROJECTS AND A VARIETY OF OTHER SOCIAL SERVICES SOME EXAMPLES OF CHRISTUS HEALTH COMMUNITY BENEFITS ACCOUNTED FOR UNDER COMMUNITY SERVICES FOR THE POOR AND UNDERSERVED INCLUDE THE CHRISTUS COMMUNITY DIRECT INVESTMENT PROGRAM (CDI) AND THE CHRISTUS FUND THE CHRISTUS BOARD OF DIRECTORS APPROVED THE FUNDING OF A CDI LOAN PROGRAM TO ENSURE THAT THE WORK OF SOCIAL ACCOUNTABILITY AND MORAL AND ETHICAL STEWARDSHIP CONTINUES IN SPITE OF CHALLENGING FISCAL CONDITIONS FACED BY LOCAL OPERATING ENTITIES THE PURPOSE OF THE CDI PROGRAM IS TO SUPPORT COMMUNITY-DRIVEN INITIATIVES PRIMARILY FOR AFFORDABLE HOUSING AND ECONOMIC DEVELOPMENT BY PROVIDING FINANCING AT BELOW-MARKET INTEREST RATES TO NOT-FOR-PROFIT ORGANIZATIONS AT TERMS NOT EXCEEDING MORE THAN FIVE YEARS THE INCOME THAT WOULD HAVE BEEN EARNED AT THE MARKET RATE LESS OUR LOAN RATE (FOREGONE INCOME) IS CONSIDERED A COMMUNITY BENEFIT FOR REPORTING PURPOSES THE TOTAL FOREGONE INTEREST REPORTED AS COMMUNITY BENEFIT FOR FY2010 WAS $234,816 THE COST OF THESE INVESTMENTS IS NOT INCLUDED IN THE PROGRAM SERVICE EXPENSES THESE LOANS ARE PROVIDED TO OTHER NON-PROFIT ORGANIZATIONS AS OF JUNE 30, 2010, THE OUTSTANDING LOAN BALANCES WERE IN THE FOLLOWING REGIONS OUTSIDE THE CHRISTUS HEALTH SERVICE AREAS $1,500,000 IN CHRISTUS HEALTH CENTRAL LOUISIANA REGION $110,914 IN CHRISTUS HEALTH GULF COAST REGION $616,569 IN CHRISTUS HEALTH NORTHERN LOUISIANA REGION $ 803,531 IN CHRISTUS HEALTH SANTA ROSA HEALTH SYSTEM REGION $891,281 IN CHRISTUS HEALTH SOUTHEAST TEXAS REGION $693,202 IN CHRISTUS HEALTH SOUTHWESTERN LOUISIANA REGION $500,000 IN CHRISTUS HEALTH SPOHN HEALTH SYSTEM REGION $ 2,531,934 TOTAL CDI LOANS OUTSTANDING AS OF JUNE 30, 2010 $7,647,431 CHRISTUS HEALTH ESTABLISHED THE CHRISTUS FUND TO PROVIDE RESOURCES TO NOT-FOR-PROFIT AGENCIES AND GROUPS WHOSE VISION, MISSION AND GOALS ARE CONSISTENT WITH CHRISTUS HEALTH'S MISSION, VALUES AND PHILOSOPHY OF A HEALTHY COMMUNITY WE BELIEVE THAT BY WORKING TOGETHER, WE CAN MAKE A PROFOUND DIFFERENCE IN THE QUALITY OF PEOPLES' LIVES AND CREATE SUSTAINABLE HEALTH IMPROVEMENTS IN OUR COMMUNITIES DURING FY 2010, GRANT FUNDS WERE DISTRIBUTED TO NON-PROFIT AGENCIES IN THE FOLLOWING REGIONS IN CHRISTUS HEALTH ARK-LA-TEX REGION $166,427 IN CHRISTUS HEALTH CENTRAL LOUISIANA REGION $77,500 IN CHRISTUS HEALTH GULF COAST REGION $179,552 IN CHRISTUS HEALTH NORTHERN LOUISIANA REGION $50,000 IN CHRISTUS SANTA ROSA HEALTH SYSTEM REGION $172,264 IN CHRISTUS HEALTH SOUTHEAST TEXAS REGION $373,050 IN CHRISTUS HEALTH SOUTHWESTERN LOUISIANA REGION $50,000 IN CHRISTUS SPOHN HEALTH SYSTEM REGION $422,340 IN CHRISTUS HEALTH SPONSOR/RELATED REGION $42,000 IN CHRISTUS HEALTH SYSTEM-WIDE INITIATIVE $50,000 IN CHRISTUS HEALTH UTAH REGION $20,000 TOTAL CHRISTUS FUND $1,603,133 PROGRAM SERVICE EXPENSE = $1,603,133 GRANTS = $1,603,133 PROGRAM SERVICE REVENUE = $0

Identifier	Return Reference	Explanation
DESCRIPTION OF RELATIONSHIPS	FORM 990, PART VI, QUESTION 2	JOHN GILLEAN, MD , ERNIE SADAU, JOHN ZIPPRICH, THOMAS ROYER, MD AND MARY LYNCH SERVE AS BOARD MEMBERS FOR EMERALD ASSURANCE CAYMAN, LTD JOHN ZIPPRICH AND PETER MADDOX SERVE AS BOARD MEMBERS FOR CHRISTUS MUGUERZA S A DE C E

Identifier	Return Reference	Explanation
DESCRIPTION OF CLASSES OF MEMBERS OR STOCKHOLDERS	FORM 990, PART VI, QUESTION 6	CHRISTUS HEALTH HAS FOUR (4) CORPORATE MEMBERS, CONSISTING OF TWO SISTERS APPOINTED BY THE CONGREGATION OF THE SISTERS OF CHARITY OF THE INCARNATE WORD, HOUSTON, TX, AND TWO SISTERS APPOINTED BY THE CONGREGATION OF THE SISTERS OF CHARITY OF THE INCARNATE WORD, SAN ANTONIO TOGETHER THOSE FOUR SISTERS COMPRISE THE CORPORATE MEMBERS AND COLLECTIVELY THEY EXERCISE THE POWERS RESERVED TO THE MEMBERS

Identifier	Return Reference	Explanation
DESCRIPTION OF CLASSES OF PERSONS AND THE NATURE OF THEIR RIGHTS	FORM 990, PART VI, QUESTION 7A	THE MEMBERS OF CHRISTUS HEALTH INCLUDE TWO SISTERS OF EACH OF THE FOUNDING SPONSORING CORPORATIONS, CONGREGATION OF THE SISTERS OF CHARITY OF THE INCARNATE WORD SAN ANTONIO AND CONGREGATION OF THE SISTERS OF CHARITY OF INCARNATE WORD HOUSTON THE MEMBERS HOLD THE AUTHORITY TO APPOINT AND REMOVE, WITH OR WITHOUT CAUSE, THE DIRECTORS OF THE CORPORATION (OTHER THAN THE FOUNDING SPONSORING CONGREGATION DIRECTORS), WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OR THE NOMINATING COMMITTEE OF THE CORPORATION

Identifier	Return Reference	Explanation
DESCR CLASSES OF PERSONS, DECISIONS REQUIRING APPR & TYPE OF VOTING RIGHTS	FORM 990, PART VI, QUESTION 7B	THE MEMBERS HOLD THE AUTHORITY TO APPROVE ANY AFFILIATION OR TRANSACTION THE RESULT OF WHICH WILL BE TO ADD A SPONSORING CONGREGATION, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPROVE ANY AFFILIATION OR TRANSACTION THE RESULT OF WHICH WILL BE TO ADD AN OTHER-THAN-CATHOLIC AFFILIATED ENTITY TO THE SYSTEM, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO ADOPT, APPROVE AND INTERPRET THE PHILOSOPHY, MISSION AND VISION OF THE CORPORATION, AS WELL AS ANY CHANGES THERETO, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO ADOPT AND APPROVE ANY AMENDMENTS, MODIFICATIONS OR RESTATEMENTS OF THE ARTICLES OF INCORPORATION OR BYLAWS OF CORPORATION, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPOINT AND REMOVE, WITH OR WITHOUT CAUSE, THE CHAIRPERSON OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPOINT AND REMOVE, WITH OR WITHOUT CAUSE, THE PRESIDENT OF THE CORPORATION AFTER CONSULTATION WITH THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPROVE THE SALE, LEASE, MORTGAGE, TRANSFER OR ENCUMBRANCE OF REAL PROPERTY OF THE CORPORATION OR ANY SYSTEM PARTICIPANT WHEN THE AMOUNT INVOLVED IS IN EXCESS OF A THRESHOLD DOLLAR AMOUNT AS REQUIRED BY CANON LAW, SUBJECT TO ANY REQUIRED CANONICAL APPROVAL OF THE ORGANIZATIONS CANONICALLY ACCOUNTABLE UNDER THE ROMAN CATHOLIC CHURCH FOR SUCH REAL PROPERTY, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPROVE THE THRESHOLD AGGREGATE AMOUNT OF DEBT TO BE INCURRED BY THE SYSTEM AND ANY INCURRENCE OF DEBT THE EFFECT OF WHICH WOULD BE TO EXCEED SUCH THRESHOLD AGGREGATE AMOUNT, WITH OR WITHOUT PRIOR ACTIONS OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPROVE ANY MERGER, CONSOLIDATION, ACQUISITION, LIQUIDATION OR DISSOLUTION OF THE CORPORATION, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, TO APPROVE ANY MERGER, CONSOLIDATION, ACQUISITION, LIQUIDATION OR DISSOLUTION OF ANY SYSTEM PARTICIPANT THAT OWNS DESIGNATED MINISTRY PROPERTY CORPORATION, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, AND TO APPROVE ANY COURSE OF ACTION PROPOSED BY A SYSTEM PARTICIPANT, WITH OR WITHOUT PRIOR ACTION OR RECOMMENDATION OF THE BOARD OF DIRECTORS OF THE CORPORATION, THE EFFECT OF WHICH WOULD BE TO CHANGE EITHER (A) THE FUNDAMENTAL USE OF DESIGNATED MINISTRY PROPERTY OR (B) THE TYPE OF SERVICES PROVIDED IN CONNECTION WITH DESIGNATED MINISTRY PROPERTY

Identifier	Return Reference	Explanation
DESCRIBE THE PROCESS USED BY MANAGEMENT &/OR GOVERNING BODY TO REVIEW 990	FORM 990, PART VI, QUESTION 11	THE FORM 990 IS PREPARED AND REVIEWED BY THE ORGANIZATION'S EXTERNAL INDEPENDENT ACCOUNTANTS THE CHRISTUS HEALTH ACCOUNTING DEPARTMENT WORKS WITH AN EXTERNAL ACCOUNTING FIRM IN PREPARATION AND REVIEW OF THE FORM 990 THE FILING ORGANIZATION'S CFO, OR OTHER DESIGNEE, REVIEWS THE FORM 990 THE FINAL FORM 990 THAT WILL BE FILED WITH THE IRS IS POSTED TO A SECURE INTERNET PORTAL FOR ALL MEMBERS OF THE BOARD OF DIRECTORS TO VIEW REVIEW OF THE FINAL FORM 990 OCCURS PRIOR TO FILING WITH THE IRS IN THE SPRING 2011 VIA A WEB PORTAL POLLING TOOL BY THE AUDIT AND/OR FINANCE SUBCOMMITTEES OF THE RESPECTIVE CHRISTUS ORGANIZATION'S BOARD, BASED ON A SET OF SUGGESTED REVIEW PROCESSES DEVELOPED BY CHRISTUS HEALTH

Identifier	Return Reference	Explanation
DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF INTEREST	FORM 990, PART VI, QUESTION 12C	AT THE END OF EACH CALENDAR YEAR, THE CHRISTUS HEALTH CORPORATE SECRETARY DISTRIBUTES A CONFLICT OF INTEREST QUESTIONNAIRE TO ALL OF THE ORGANIZATION'S BOARD AND COMMITTEE MEMBERS FOR COMPLETION PRIOR TO THE 1ST OF JANUARY IN THE NEXT YEAR THE CORPORATE SECRETARY THOROUGHLY REVIEWS ALL COMPLETED AND EXECUTED CONFLICT OF INTEREST QUESTIONNAIRE FORMS TO ENSURE ACCURACY AND THAT NO POTENTIAL OR IDENTIFIED CONFLICT IS DISCLOSED OR EXISTS THE ORGANIZATION'S BOARD OF DIRECTORS IS RESPONSIBLE FOR ENFORCEMENT OF THE CONFLICT OF INTEREST POLICY OF THE ORGANIZATION

Identifier	Return Reference	Explanation
COMPENSATION DETERMINATION PROCESS	FORM 990, PART VI, QUESTIONS 15A & 15B	THE EXECUTIVE COMPENSATION COMMITTEE OF CHRISTUS HEALTH DETERMINES THE COMPENSATION OF THE CEO (OR EXECUTIVE DIRECTOR, AS APPLICABLE), OFFICERS AND KEY EMPLOYEES OF CHRISTUS HEALTH AND CERTAIN OTHER OFFICERS AND KEY EMPLOYEES OF RELATED ORGANIZATIONS THE EXECUTIVE COMPENSATION COMMITTEE IS COMPOSED OF INDIVIDUALS WHO HAVE NO CONFLICT OF INTEREST WITH THE COMPENSATION ARRANGEMENTS AT HAND CHRISTUS HEALTH CEO'S COMPENSATION IS SUBJECT TO APPROVAL BY THE CHRISTUS HEALTH BOARD, AFTER DISCUSSION BY THE EXECUTIVE COMPENSATION COMMITTEE THE EXECUTIVE COMPENSATION COMMITTEE OF THE CHRISTUS HEALTH BOARD SELECTS AN INDEPENDENT EXTERNAL FIRM TO PERFORM AN INDEPENDENT COMPENSATION REVIEW, TO ENSURE THAT ALL COMPENSATION IS REASONABLE AND COMPARABLE TO OTHER SIMILARLY SITUATED ORGANIZATIONS, FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS, AND TO PROVIDE SUPPORTING INFORMATION OF COMPENSATION DECISIONS ON AN ANNUAL BASIS THE EXTERNAL CONSULTANT 1 COMPLETES A REVIEW OF THE COMPENSATION AND BENEFITS OF THE CEO AND PROVIDES A WRITTEN REPORT, AND APPEARS IN PERSON WITH THE COMMITTEE TO ADDRESS THE ANNUAL COMPENSATION REVIEW AND DECISIONS RELATED TO SUCH COMPENSATION FOR THE CEO THE CONSULTANT ALSO PROVIDES ALL OF THE COMPARABLE MARKET DATA TO SUPPORT RECOMMENDATIONS AND DECISIONS 2 DEVELOPS THE MERIT INCREASE RECOMMENDATIONS FOR ALL DESIGNATED SYSTEM EXECUTIVES BASED ON MARKET COMPARABILITY 3 RECOMMENDS THE CHANGES IN THE COMPENSATION STRUCTURE (GRADES) BASED ON THE MARKET CHANGES 4 COMPLETES A REVIEW AND EVALUATION OF NEWLY CREATED POSITIONS TO RECOMMEND A GRADE PLACEMENT TO THE COMMITTEE FOR ITS DISCUSSION AND APPROVAL ON A BI-ANNUAL BASIS, THE EXTERNAL CONSULTANT COMPLETES A DETAILED REVIEW OF ALL OTHER DESIGNATED SYSTEM EXECUTIVES' COMPENSATION AND BENEFITS THIS GROUP INCLUDES ALL TOP MANAGEMENT OFFICIALS, OTHER OFFICERS AND KEY LEADERS OF THE ORGANIZATION THE REVIEW INCLUDES RECOMMENDATIONS TO THE COMMITTEE ON ANY CHANGES NECESSARY IN EITHER SPECIFIC COMPENSATION OR COMPENSATION STRUCTURE TO ENSURE MARKET COMPETITIVENESS, REASONABLENESS AND INTERNAL EQUITY UPON RECOMMENDATIONS FROM THE INDEPENDENT EXTERNAL FIRM, THE EXECUTIVE COMPENSATION COMMITTEE MAKES FINAL COMPENSATION DECISIONS ADDITIONALLY, THE EXECUTIVE COMPENSATION COMMITTEE REVIEWS ALL COMPENSATION PAYMENTS FOR EXCESS BENEFIT TRANSACTIONS THE DISCUSSION AND DECISIONS OF THE COMMITTEE ARE DOCUMENTED AND FORMALIZED IN THE COMMITTEE MINUTES AND MAINTAINED ON RECORD

Identifier	Return Reference	Explanation
PUBLIC DISCLOSURE OF 1023 AND FORMS 990 & 990-T	FORM 990, PART VI, QUESTION 18	CHRISTUS HEALTH AND MOST OF ITS AFFILIATED ENTITIES DO NOT HAVE FORMS 1023 BECAUSE OF THEIR INCLUSION IN THE IRS GROUP RULING WITH THE UNITED STATES CONFERENCE OF CATHOLIC BISHOPS, WHICH COVERS THE ORGANIZATION LISTED IN THE ANNUAL OFFICIAL CATHOLIC DIRECTORY CHRISTUS HEALTH'S WEBSITE DISPLAYS THE IRS GROUP RULING AND RELEVANT ANNUAL OFFICIAL CATHOLIC DIRECTORY PAGES FOR THE ORGANIZATIONS RELATED TO CHRISTUS HEALTH FORMS 990 AND 990-T ARE MADE AVAILABLE UPON REQUEST

Identifier	Return Reference	Explanation
AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY, & FIN STMTS TO GEN PUBLIC	FORM 990, PART VI, QUESTION 19	THE CONSOLIDATED AUDITED FINANCIAL STATEMENTS OF CHRISTUS HEALTH ARE MADE AVAILABLE TO THE PUBLIC VIA THE CHRISTUS HEALTH WEBSITE THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE NOT MADE AVAILABLE TO THE PUBLIC

Identifier	Return Reference	Explanation
HOURS WORKED FOR RELATED ORGANIZATION	FORM 990, PART VII, SECTION A	SEVERAL OFFICERS, DIRECTORS AND KEY EMPLOYEES OF THE FILING ORGANIZATION DEVOTE TIME TO RELATED ORGANIZATIONS AS OFFICERS OR DIRECTORS NAME HRS AT RELATED ORG THOMAS ROYER, MD 1 CHRISTUS STEHLIN FOUNDATION 1 EMERALD ASSURANCE CAYMAN, LTD GEORGE CONKLIN 1 CHRISTUS STEHLIN FOUNDATION 1 CHRISTUS HEALTH FOUNDATION JOHN GILLEAN, MD 1 ST JOSEPH HEALTH SYSTEM 1 CHRISTUS STEHLIN FOUNDATION 1 EMERALD ASSURANCE CAYMAN, LTD JAY HERRON 1 ST JOSEPH HEALTH SYSTEM 1 CHRISTUS HEALTH LAB RETENTION TRUST PETER MADDOX 2 ST VINCENT HOSPITAL LINDA MCCLUNG 1 ST JOSEPH HEALTH SYSTEM 1 CHRISTUS CONTINUING CARE ERNIE SADAU 2 ST VINCENT WILLIAM L PARDUE 5 CHRISTUS CONTINUING CARE 1 CHRISTUS STEHLIN FOUNDATION CYNTHIA ZATORSKI 1 CHRISTUS HEALTH FOUNDATION DARELL DIXON 1 CHRISTUS HEALTH WILKINSON PHYSICIAN NETWORK DONNA MIKULECKY 26 CHRISTUS HEALTH WILKINSON PHYSICIAN NETWORK SISTER WALTER MAHER 1 CHRISTUS HEALTH NORTHERN LOUISIANA JOHN ZIPPRICH 1 EMERALD ASSURANCE CAYMAN, LTD 1 CHRISTUS MUGUERZA S A DE C E MARY LYNCH 1 EMERALD ASSURANCE CAYMAN, LTD Form 990, Part VII, Section A Effective 4/12/10 Mary Siva became an employee of CHRISTUS Health Therefore no compensation is reported for calendar year 2009 Calendar 2009 compensation reported on Part VII for Deb Vardell is for services as executive assistant at CHRISTUS Health Functional Expense, Line 9, Other Employee benefits Form 990, Part IX Reported in other employee benefits is the Employee Health care premiums collected netted with health care claims expense Premiums collected exceeded health care claims paid for fiscal year end 6-30-2010

Identifier	Return Reference	Explanation
SUPPLEMENTAL INFORMATION ON TAX EXEMPT BONDS	FORM 990, SCHEDULE K, PART I	FORM 990, SCHEDULE K, PART I, PAGE 1 A HARRIS COUNTY HEALTH FACILITIES DEVELOPMENT CORPORATION (C) CUSIP # 41315RFS8, 41315RFT6, 41315RFU3, 41315RFV1 (F) DESCRIPTION OF PURPOSE CONSTRUCT NEW HEALTHCARE FACILITIES AND ADVANCE REFUND A PRIOR ISSUE (JULY 28, 1999) B HARRIS COUNTY HEALTH FACILITIES DEVELOPMENT CORPORATION (D) SEPTEMBER 17, 2007 NOVEMBER 8, 2005 WAS ERRONEOUSLY REPORTED FOR 2009 (F) CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 8, 2005) C COASTAL BEND HEALTH FACILITIES DEVELOPMENT CORPORATION (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 17, 1998) AND CONSTRUCT NEW HEALTHCARE FACILITIES D LOUISIANA PUBLIC FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (SEPTEMBER 17, 2007) E LOUISIANA PUBLIC FACILITIES AUTHORITY (F) CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 8, 2005) FORM 990, SCHEDULE K, PART I, PAGE 2 A LOUISIANA PUBLIC FACILITIES AUTHORITY (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 20, 2007) B TARRANT COUNTY CULTURAL EDUCATION FACILITIES FINANCE CORPORATION (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 8, 2005) C TARRANT COUNTY CULTURAL EDUCATION FACILITIES FINANCE CORPORATION (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (NOVEMBER 8, 2005, NOVEMBER 20, 2007) D TARRANT COUNTY CULTURAL EDUCATION FACILITIES FINANCE CORPORATION (F) DESCRIPTION OF PURPOSE CURRENTLY REFUND A PRIOR ISSUE (DECEMBER 19, 2008) FORM 990, SCHEDULE K PART II, PAGE 1 A LINE 5 BOND ISSUANCE COSTS = $1,633,252 CREDIT ENHANCEMENTS = $4,738,000 B LINE 5 BOND ISSUANCE COSTS = $538,945 CREDIT ENHANCEMENTS = $2,360,000 C LINE 5 BOND ISSUANCE COSTS = $371,000 CREDIT ENHANCEMENTS = $914,000 D LINE 5 BOND ISSUANCE COSTS = $1,060,000 CREDIT ENHANCEMENTS = $4,595,000 E LINE 5 BOND ISSUANCE COSTS = $775,238 CREDIT ENHANCEMENTS = $575,366 FORM 990, SCHEDULE K PART II, PAGE 2 A LINE 4 UNSPENT 'TRANSFERRED PROCEEDS' OF 2007C ($6,305,785) ARE NOT REQUIRED TO BE REPORTED A LINE 5 BOND ISSUANCE COSTS = $0 CREDIT ENHANCEMENTS = $0 B LINE 5 BOND ISSUANCE COSTS = $3,029,908 CREDIT ENHANCEMENTS = $2,510,025 C LINE 4 UNSPENT 'TRANSFERRED PROCEEDS' OF 2007B ($48,866,086) ARE NOT REQUIRED TO BE REPORTED C LINE 5 BOND ISSUANCE COSTS = $1,638,195 CREDIT ENHANCEMENTS = $235,297 D LINE 5 BOND ISSUANCE COSTS = $0 CREDIT ENHANCEMENTS = $0

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CHRISTUS HEALTH

Employer identification number
76-0590551

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
See Additional Data Table					

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No
See Additional Data Table											

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
See Additional Data Table							

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

		Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III or IV			
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to other organization(s)	1b	Yes	
c Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f	Yes	
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i	Yes	
j Lease of facilities, equipment, or other assets from other organization(s)	1j	Yes	
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l	Yes	
m Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n Sharing of paid employees	1n	Yes	
o Reimbursement paid to other organization for expenses	1o	Yes	
p Reimbursement paid by other organization for expenses	1p	Yes	
q Other transfer of cash or property to other organization(s)	1q	Yes	
r Other transfer of cash or property from other organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	See Additional Data Table		
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 76-0590551
Name: CHRISTUS HEALTH

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
CHRISTUS HEALTH ARK-LA-TEX 2600 ST MICHAEL DRIVE TEXARKANA, TX75503 75-2796815	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH CENTRAL LOUISIANA 3330 MASONIC DRIVE ALEXANDRIA, LA71301 72-0408984	HLTHCARE SVCS	LA	501(c)3	3	N/A
CHRISTUS HEALTH GULF COAST PO BOX 922037 HOUSTON, TX77292 76-0591592	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH NORTHERN LOUISIANA ONE SAINT MARY PLACE SHREVEPORT, LA71101 72-0408982	HLTHCARE SVCS	LA	501(c)3	3	N/A
Christus Spohn Health System Corporation 600 ELIZABETH STREET CORPUS CHRISTI, TX78404 74-1109836	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH SOUTHEAST TEXAS 3010 HARRISON STREET BEAUMONT, TX77702 76-0591590	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH SOUTHWESTERN LOUISIANA 524 DR MICHAEL DEBAKEY DR LAKE CHARLES, LA70601 72-0411322	HLTHCARE SVCS	LA	501(c)3	3	N/A
CHRISTUS SANTA ROSA HEALTH CARE CORP 333 N SANTA ROSA STREET SAN ANTONIO, TX78207 74-1109665	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH UTAH 451 BISHOP FEDERAL LANE SALT LAKE CITY, UT84115 87-0231682	HLTHCARE SVCS	UT	501(c)3	9	N/A
CHRISTUS Continuing Care 1700 W LOOP SOUTH SUITE 1100A HOUSTON, TX77027 74-2898615	HLTHCARE SVCS	TX	501(c)3	3	N/A
CH WILKINSON PHYSICIAN NETWORK 1700 WEST LOOP SOUTH STE 400B HOUSTON, TX77027 76-0422435	HLTHCARE SVCS	TX	501(c)3	11-TYPE 1	N/A
ST JOSEPH COMMUNITY FOUNDATION 2800 LAMAR AVE CAPITAL ONE 2ND F PARIS, TX75460 42-1619230	SUPP HTH SVCS	TX	501(c)3	11-TYPE 1	N/A
CHRISTUS ST JOSEPH'S HEALTH SYSTEM 2707 NORTH LOOP WEST HOUSTON, TX77008 75-0800674	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS STEHLIN FDN FOR CANCER RESEARCH 10301 Stella Link Suite A HOUSTON, TX77025 74-1622404	CANCER RESCH	TX	501(c)3	9	N/A
DUBUIS HEALTH SYSTEM INC 10333 RICHMOND AVE SUITE 300 HOUSTON, TX77042 72-1270964	HLTHCARE SVCS	TX	501(c)3	3	N/A
CHRISTUS HEALTH FOUNDATION 2707 NORTH LOOP WEST HOUSTON, TX77008 61-1500100	SUPP HTH SVCS	TX	501(c)3	11-TYPE 1	N/A
ST FRANCES CABRINI HPL FDN OF ALEXANDRIA 3330 MASONIC DRIVE ALEXANDRIA, LA71301 72-0998302	SUPP HTH SVCS	LA	501(c)3	7	CNLA
ST FRANCES CABRINI HOSPITAL AUXILARY 3330 MASONIC DRIVE ALEXANDRIA, LA71301 23-7255175	SUPP HTH SVCS	LA	501(c)3	9	CNLA
CHRISTUS FOUNDATION FOR HEALTHCARE PO BOX 1919 HOUSTON, TX77251 74-6074210	SUPP HTH SVCS	TX	501(c)3	7	GULF COAST
CHRISTUS SCHUMPERT HEALTH SYSTEM FD ONE ST MARY PLACE SHREVEPORT, LA71101 72-1219280	SUPP HTH SVCS	LA	501(c)3	7	NOLA
CHRISTUS SPOHN HTH SYSTEM DEVELOPMENT FD 600 ELIZABETH STREET CORPUS CHRISTI, TX78404 74-1906005	SUPP HTH SVCS	TX	501(c)3	7	SPOHN HS
CHRISTUS HEALTH FDN OF SOUTHEAST OF TX 2830 CALDER BEAUMONT, TX77702 76-0136274	SUPP HTH SVCS	TX	501(c)3	11-TYPE 1	SETX
FRIENDS OF SANTA ROSA FOUNDATION 333 N SANTA ROSA STREET SAN ANTONIO, TX78207 74-2723391	SUPP HTH SVCS	TX	501(c)3	11-TYPE 1	CSRHCC
SANTA ROSA FAMILY HEALTH CENTER 333 N SANTA ROSA STREET SAN ANTONIO, TX78207 74-2806531	HLTHCARE SVCS	TX	501(c)3	9	CSRHCC
SANTA ROSA CHILDREN'S HOSPITAL FDTN 343 WEST HOUSTON ST STE 505 SAN ANTONIO, TX78205 74-1224362	SUPP HTH SVCS	TX	501(c)3	7	SRHCC
CHRISTUS Health Liab Retention Trust 2707 NORTH LOOP WEST HOUSTON, TX77008 76-0259623	SELF INS TRST	TX	501(c)3	11-Type I	NA

Form 990, Schedule R, Part III - Identification of Related Organizations Taxable as a Partnership

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income ($)	(g) Share of end-of-year assets ($)	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount on Box 20 of K-1 ($)	(j) General or Managing Partner? Yes	(j) No
LOUISIANA ATHLETIC CLUB LLC 1140 COLLEGE DRIVE BOX 511 PINEVILLE, LA71359 72-1461793	HEALTH CLUB	LA	CH CNLA					No			No
HEART CENTER OF CENTRAL LOUISIANA LP 2108 Texas Avenue Sutie 2081 Alexandria, LA71301 72-1325012	HLTHCARE SERVICES	LA	CH CNLA					No			No
WEST HOUSTON REAL ESTATE DEVELOPMNT LLC 1700 WEST LOOP SOUTH 1200 HOUSTON, TX77027 26-2330994	HLTHCARE SERVICES	TX	CH Gulf Coast					No			No
ST CATHERINE MANAGEMENT LLC 701 S FRY ROAD KATY, TX774502255 77-0620092	HLTHCARE SERVICES	TX	CH Gulf Coast					No			No
KATY ST CATHERINE SURGERY CENTER LP 707 S FRY ROAD STE 150 KATY, TX77450 20-1168675	HLTHCARE SERVICES	TX	St Cth Mgmt LLC					No			No
SOUTHEAST TEXAS BARIATRIC CTR 3050 LIBERTY STREET BEAUMONT, TX77702 20-8358548	BARIATRIC SVCS	TX	CH SETX					No			No
SOUTHEAST TEXAS PAIN MANAGEMENT LLC PO BOX 5405 BEAUMONT, TX77726 26-1678856	PAIN MGT HTH SEVS	TX	CH SETX					No			No
ST ELIZABETH REHAB PARTNERS 2830 CALDER BEAUMONT, TX777021809 20-5657181	HLTHCARE SERVICES	TX	H VENTURES-SETX					No			No
SOUTH RYAN MRI LLC 650 DR MICHAEL DEBAKEY DRIVE LAKE CHARLES, LA70601 74-3103662	IMAGING SERVICES	LA	OCCUPATIONAL HS					No			No
MCKENNA LEASING GP LLC 600 NORTH UNION AVE NEW BRAUNFELS, TX78130 74-1191729	INVESTMENT	TX	CSRHCC					No			No
MCKENNA EQUIPMENT LEASING LP 600 NORTH UNION AVE NEW BRAUNFELS, TX78130 20-4177842	MED EQUIP LEASING	TX	CSRHCC					No			No
NEW BRAUNFELS SURGICAL CENTER LLC 600 NORTH UNION AVE NEW BRAUNFELS, TX78130 81-0571408	HLTHCARE SERVICES	TX	CSRHCC					No			No
CSR Outpatient Surgery New Braunfels 600 NORTH UNION AVE NEW BRAUNFELS, TX78130 81-0571409	HLTHCARE SERVICES	TX	CSRHCC					No			No
CSR Surgery Center LLP 15305 Dallas Pkwy Ste 1600 LB 28 Addison, TX75001 20-0424958	HLTHCARE SERVICES	TX	CSRHCC					No			No
CHRISTUS Santa Rosa Physicians 333 Santa Rosa San Antonio, TX78207 41-2092141	HLTHCARE SERVICES	TX	CSRHCC					No			No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal Domicile (State or Foreign Country)	(d) Direct Controlling Entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income ($)	(g) Share of end-of-year assets ($)	(h) Percentage ownership
ARK-LA-TEX HEALTH NETWORK PO BOX 2911 TEXARKANA, TX755042911 75-2562459	HLTHCARE SERVICES	TX	CH Ark-La-Tex	C-Corp			
AK INTEGRATED COMM HLTH NTWK 2600 ST MICHAEL DRIVE TEXARKANA, TX75503 76-0480684	HLTHCARE SERVICES	TX	CH Ark-La-Tex	C-Corp			
HOUSTON METROPOLITAN HLTH NTWK 1700 WEST LOOP SOUTH SUITE 400A HOUSTON, TX77027 76-0427193	HLTHCARE SERVICES	TX	CH Gulf Coast	C-Corp			
SCH MGMNT SOLUTIONS INC ONE ST MARY PLACE SHREVEPORT, LA71101 72-1270625	MGT JOINT VENTURE	LA	NOLA	C-Corp			
SPOHN HEALTH NETWORK 600 ELIZABETH STREET CORPUS CHRISTI, TX78404 74-2616328	HLTH PLAN ADMIN S	TX	Spohn HSC	C-Corp			
SPOHN INVESTMENT CORPORATION 600 ELIZABETH STREET CORPUS CHRISTI, TX78404 74-2322574	RENTALS	TX	Spohn HSC	C-Corp			
CHRISTUS SOUTHEAST TEXAS PHO 3010 HARRISON STREET SUITE 202 BEAUMONT, TX77702 76-0429902	MEDICAL SERVICES	TX	CH SETX	C-Corp			
HEALTH VENTURES OF SE TEXAS 1700 WEST LOOP SOUTH SUITE 400A HOUSTON, TX77027 76-0397263	BUILDING RENTAL	TX	CH SETX	C-Corp			
OCCUPATIONAL HEALTH SVCS INC 524 DR MICHAEL DEBAKEY DRIVE LAKE CHARLES, LA70601 72-1217389	MEDICAL SERVICES	LA	CH SWLA	C-Corp			
SOUTHWESTERN LOUISIANA PHO 524 DR MICHAEL DEBAKEY DRIVE LAKE CHARLES, LA70601 72-1274526	HLTHCARE SERVICES	LA	CH SWLA	C-Corp			
SOUTH RYAN DEVELOPMENT CORP 524 DR MICHAEL DEBAKEY DRIVE LAKE CHARLES, LA70601 72-1183790	LEASING BUILDINGS	LA	CH SWLA	C-Corp			
MCKENNA PROF BLDG OWNERS ASSOC 6363 N HIGHWAY 161 SUITE 450 IRVING, TX75038 74-2742934	BUILDING ASSOC	TX	CSRHCC	C-Corp			
CSR MEDICAL GROUP 6243 IH 10 WEST SUITE 480 SAN ANTONIO, TX78201 74-2727562	HEALTH SERVICES	TX	CSRHCC	C-Corp			
SOUTH TEXAS HEALTH ALLIANCE 6243 IH 10 WEST SUITE 480 SAN ANTONIO, TX78201 74-2782184	HEALTH SERVICES	TX	CSRHCC	C-Corp			
CHRISTUS AT HOME INC 4241 WOODCOCK SUITE A-100 SAN ANTONIO, TX78228 61-1563879	HLTHCARE SERVICES	TX	CCC	C-Corp			
CHRISTUS Muguerza SAPI de CV Carretera Nacional No 6501 Col E Monterrey, N L 64988 MX	HLTHCARE SERVICES	MX	NA	C-Corp	8,301,605	35,241,140	55 938 %
EMERALD ASSURANCE CAYMAN LTD PO BOX 1051 GRAND CAYMAN KY1-1102 CJ 98-0407545	INSURANCE	CJ	NA	C-Corp	36,458,876	150,262,897	100 000 %
NORTHERN LOUISIANA PHO 915 MARGARET PLACE SHREVEPORT, LA71120 72-1274151	HLTHCARE SERVICES	LA	CH NOLA	C CORP			
CSR- NEW BRAUNFELS MED GRP 600 NORTH UNION AVE NEW BRAUNFELS, TX78130 26-0393840	HLTHCARE SERVICES	TX	CSRHCC	C-CORP			
SUPERCAMPTO INC 10301 STELLA LINK SUITE A HOUSTON, TX77025 76-0534968	MEDICAL RESEARCH	TX	STEHLIN FND	C-CORP			
ROMLAC INC 10301 STELLA LINK SUITE A HOUSTON, TX77025 74-1674943	REAL ESTATE INVST	TX	STEHLIN FND	C-CORP			

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount Involved ($)
(1)	CH WILKINSON PHYSICIAN NETWORK	A	215,626
(2)	CH WILKINSON PHYSICIAN NETWORK	K	283,795
(3)	CH WILKINSON PHYSICIAN NETWORK	N	71,296
(4)	CH WILKINSON PHYSICIAN NETWORK	P	1,938,176
(5)	CH WILKINSON PHYSICIAN NETWORK	Q	7,000,000
(6)	CHRISTUS CONTINUING CARE	K	278,109
(7)	CHRISTUS CONTINUING CARE	L	1,834,272
(8)	CHRISTUS CONTINUING CARE	P	4,083,464
(9)	CHRISTUS HEALTH ARK-LA-TEX	P	728,441
(10)	CHRISTUS HEALTH ARK-LA-TEX	B	131,106
(11)	CHRISTUS HEALTH ARK-LA-TEX	K	8,831,557
(12)	CHRISTUS HEALTH ARK-LA-TEX	P	24,253,608
(13)	CHRISTUS HEALTH ARK-LA-TEX	P	4,595,602
(14)	CHRISTUS HEALTH ARK-LA-TEX	R	1,724,544
(15)	CHRISTUS HEALTH ARK-LA-TEX	Q	775,410
(16)	CHRISTUS HEALTH CENTRAL LOUISIANA	B	123,512
(17)	CHRISTUS HEALTH CENTRAL LOUISIANA	K	8,627,736
(18)	CHRISTUS HEALTH CENTRAL LOUISIANA	P	24,718,727
(19)	CHRISTUS HEALTH CENTRAL LOUISIANA	P	5,972,018
(20)	CHRISTUS HEALTH CENTRAL LOUISIANA	Q	20,577,452
(21)	CHRISTUS HEALTH CENTRAL LOUISIANA	Q	445,140
(22)	CHRISTUS HEALTH GULF COAST	P	677,069
(23)	CHRISTUS HEALTH GULF COAST	A	591,708
(24)	CHRISTUS HEALTH GULF COAST	K	8,093,797
(25)	CHRISTUS HEALTH GULF COAST	L	22,793,274
(26)	CHRISTUS HEALTH GULF COAST	P	22,888,606
(27)	CHRISTUS HEALTH GULF COAST	P	4,120,425
(28)	CHRISTUS HEALTH GULF COAST	R	200,568
(29)	CHRISTUS HEALTH GULF COAST	Q	869,592
(30)	CHRISTUS HEALTH GULF COAST	Q	745,386
(31)	CHRISTUS HEALTH GULF COAST	F	50,620
(32)	CHRISTUS HEALTH GULF COAST	N	2,546,911
(33)	CHRISTUS HEALTH GULF COAST	P	168,263
(34)	CHRISTUS HEALTH GULF COAST	R	59,071
(35)	CHRISTUS HEALTH NORTHERN LOUSIANA	K	11,057,379
(36)	CHRISTUS HEALTH NORTHERN LOUSIANA	P	35,690,965
(37)	CHRISTUS HEALTH NORTHERN LOUSIANA	P	5,119,834
(38)	CHRISTUS HEALTH NORTHERN LOUSIANA	R	2,887,492
(39)	CHRISTUS HEALTH NORTHERN LOUSIANA	Q	679,456
(40)	CHRISTUS HEALTH SOUTHEAST TEXAS	B	90,265
(41)	CHRISTUS HEALTH SOUTHEAST TEXAS	J	14,664
(42)	CHRISTUS HEALTH SOUTHEAST TEXAS	K	15,609,808
(43)	CHRISTUS HEALTH SOUTHEAST TEXAS	L	9,564,842
(44)	CHRISTUS HEALTH SOUTHEAST TEXAS	P	47,373,666
(45)	CHRISTUS HEALTH SOUTHEAST TEXAS	P	4,865,818
(46)	CHRISTUS HEALTH SOUTHEAST TEXAS	R	1,265,401
(47)	CHRISTUS HEALTH SOUTHEAST TEXAS	Q	1,536,037
(48)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	B	82,200
(49)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	K	6,188,057
(50)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	P	15,866,551
(51)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	P	2,534,676
(52)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	R	1,649,637
(53)	CHRISTUS HEALTH SOUTHWESTERN LOUISIANA	Q	472,983
(54)	CHRISTUS HEALTH UTAH	K	257,584
(55)	CHRISTUS HEALTH UTAH	P	2,216,548
(56)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	B	54,279
(57)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	J	325,620
(58)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	K	20,373,064
(59)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	O	551,317
(60)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	P	43,029,683
(61)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	P	14,533,057
(62)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	R	1,555,101
(63)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	Q	34,208,057
(64)	CHRISTUS SANTA ROSA HEALTH CARE CORPORATION	Q	3,037,658
(65)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	B	279,372
(66)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	B	238,539
(67)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	Q	107,791
(68)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	K	24,700,277
(69)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	P	63,714,168
(70)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	P	9,722,763
(71)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	R	663,743
(72)	CHRISTUS SPOHN HEALTH SYSTEM CORPORATION	Q	826,778
(73)	DUBUIS HEALTH SYSTEM INC	A	166,202
(74)	DUBUIS HEALTH SYSTEM INC	K	776,798
(75)	DUBUIS HEALTH SYSTEM INC	L	1,058,077
(76)	DUBUIS HEALTH SYSTEM INC	P	689,730
(77)	EMERALD ASSURANCE CAYMAN LTD	C	51,419
(78)	EMERALD ASSURANCE CAYMAN LTD	O	24,599,021
(79)	SANTA ROSA FAMILY HEALTH CENTER	P	519,678
(80)	SPOHN INVESTMENT CORPORATION	P	92,947
(81)	ST ELIZABETH REHAB PARTNERS LLP	P	78,532
(82)	ST VINCENT HOSPITAL	B	72,941
(83)	ST VINCENT HOSPITAL	K	8,519,986
(84)	ST VINCENT HOSPITAL	P	4,325,822
(85)	ST VINCENT HOSPITAL	Q	1,325,791
(86)	CHRISTUS STEHLIN FOUNDATION FOR CANCER RESEAR	B	3,523,305
(87)	CHRISTUS FOUNDATON FOR HEALTHCARE	B	160,000
(88)	CHRISTUS HEALTH SOUTHEAST TEXAS	N	3,261,610
(89)	CHRISTUS HEALTH SOUTHEAST TEXAS	P	191,269
(90)	CHRISTUS HEALTH SOUTHEAST TEXAS	P	9,582,922
(91)	SPOHN INVESTMENT CORPORATION	P	141,578
(92)	CHRISTUS CONTINUING CARE	K	2,176,757
(93)	CHRISTUS CONTINUING CARE	I	1,404,131
(94)	CHRISTUS CONTINUING CARE	P	663,235

TY 2009 Category 3 filer statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Amount Of Indebtedness	Type Of Indebtedness	Name	Address	Identifying Number	Number Of Shares
0	NONE	CHRISTUS HEALTH	2707 NORTH LOOP WEST HOUSTON, TX 77008	76-0590551	19,017

TY 2009 Category 3 filer statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Amount Of Indebtedness	Type Of Indebtedness	Name	Address	Identifying Number	Number Of Shares
0	NONE	CHRISTUS HEALTH	2707 NORTH LOOP WEST HOUSTON, TX 77008	76-0590551	5,593

TY 2009 Category 3 filer statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Amount Of Indebtedness	Type Of Indebtedness	Name	Address	Identifying Number	Number Of Shares
0	NONE	CHRISTUS HEALTH	2707 NORTH LOOP WEST HOUSTON, TX 77008	76-0590551	559

TY 2009 Category 3 filer statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Amount Of Indebtedness	Type Of Indebtedness	Name	Address	Identifying Number	Number Of Shares
0	NONE	CHRISTUS HEALTH	2707 NORTH LOOP WEST HOUSTON, TX 77008	76-0590551	973,821

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	10,987,304

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	6,129,653

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	10,483,151

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	5,677,026

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	390,091

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	3,428,039

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	9,008,950

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	3,009,147

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TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	6,411,169

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	72,744

TY 2009 Earnings and Profits Other Adjustments Statement

Name: CHRISTUS HEALTH

EIN: 76-0590551

Description	Amount
PREPAID EXPENSES	466,771

II Target Shareholders

A A statement of the cost or other basis of the stock or securities transferred in the exchange

Not applicable

B A statement of the amount of stock or securities and other property or money received from each exchange, including a statement of all distributions or other disposition made thereof

Allende cancelled all of its stock as part of the reorganization

Upon request, the fair market value of the stock cancelled in the reorganization will be made available

STATEMENT PURSUANT TO REGULATIONS SECTION 1.368-3(A)
CHRISTUS MUGUERZA CONCHITA, SA DE CV
A CORPORATION A PARTY TO A REORGANIZATION
TAX YEAR ENDING DECEMBER 31, 2009

The taxpayer, Christus Muguerza Conchita, SA de CV ("Conchita"), a Mexican corporation, attaches this statement to its 2009 tax return as required by Treas. Reg. §1.368-3(a), because the taxpayer was a party to a reorganization that occurred during the taxpayer's taxable year. The Treas. Reg. §1.368-3 requirements are addressed below.

I. Corporate Parties to a Reorganization

A. A copy of a plan of reorganization and a statement describing the purposes and transactions incident thereto

On December 31, 2009, a resolution (the "Resolution") was adopted approving the corporate restructuring (the "Restructuring") through a merger of Conchita with Christus Muguerza Hospitales, SA de CV (fka. Christus Muguerza Sur, SA de CV) ("CM Hospitales"), also a Mexican corporation. CM Hospitales obtained a Certificate from the Registrar of Corporations of Monterrey, Nuevo Leon, Mexico certifying that the merger of Conchita with CM Hospitales was effective on December 31, 2009 (the "Certificate"). The Resolution and Certificate are attached.

This merger constituted a reorganization described in Section 368(a)(1)(D).

The business purpose for the Restructuring was to allow more efficient administration of Conchita.

B. A statement of the cost or other basis of all property transferred

Upon request, the adjusted bases of the assets transferred in the reorganizations will be made available.

C. A statement of the amount of stock or securities and other property or money received from each exchange, including a statement of all distributions or other disposition made thereof

In the reorganization, Conchita transferred all of its assets to CM Hospitales and all stock of Conchita was cancelled without any repayment of capital in respect to such shares.

D. A statement of the amount of liabilities assumed upon each exchange, and the amount and nature of any liabilities to which any property acquired is subject

CM Hospitales assumed all the liabilities of Conchita, in the amount of MXP 72,062,510, as a part of the reorganization.

II Target Shareholders

A A statement of the cost or other basis of the stock or securities transferred in the exchange

Not applicable

B A statement of the amount of stock or securities and other property or money received from each exchange, including a statement of all distributions or other disposition made thereof

Conchita cancelled all of its stock as part of the reorganization

Upon request, the fair market value of the stock cancelled in the reorganization will be made available

NOTARIA PUBLICA
LIC. RAFAEL S. GARZA ZAMBRANO

==== LIBRO (31) TREINTA Y UNO ==
==== FOLIO (6055) SEIS MIL CINCUENTA Y CINCO ==
==== ESCRITURA PUBLICA NÚMERO (1766) MIL SETECIENTOS SESENTA Y SEIS ============================
==== EN LA CIUDAD DE SAN PEDRO GARZA GARCIA, NUEVO LEON, ESTADOS UNIDOS MEXICANOS a los 31 treinta y un días del mes de Diciembre del 2009 dos mil nueve. Ante mí Licenciado RAFAEL SALVADOR GARZA ZAMBRANO, Notario Público Titular de la Notaría Pública Número 137 ciento treinta y siete, con ejercicio en el Primer Distrito Registral en el Estado, compareció el señor LICENCIADO ROGELIO SEGOVIA GONZÁLEZ, en su carácter de Delegado Especial de la Asamblea General Extraordinaria de Accionistas de la sociedad denominada CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V., DIJO: =======
==== I.- Que los accionistas de su representada celebraron el día (8) ocho de Diciembre del 2009 dos mil nueve, una Asamblea General Extraordinaria de Accionistas, en la que se resolvió lo siguiente: ==============
==== a).- La aprobación del Balance General de la Sociedad al (30) treinta de Noviembre de 2009 dos mil nueve. ==
==== b).- La aprobación de fusión de la Sociedad, como Sociedad Fusionante, con las sociedades Christus Muguerza Corporativo, S.A. de C.V. y Clínica Regional Linares, S.A. de C.V. como Sociedades Fusionadas. ====
==== c).- Designación de las personas encargadas de formalizar los acuerdos tomados. ====================
==== II.- Que en los términos de lo previsto en el artículo 194 ciento noventa y cuatro de la Ley General de Sociedades Mercantiles ocurre a PROTOCOLIZAR el acta que se levantó con motivo de la celebración de la Asamblea General Extraordinaria de Accionistas antes mencionada, acta que Yo, el Notario, doy fe tener a la vista debidamente firmada, agregando al apéndice de mi protocolo una copia certificada de la misma con el mismo número de la presente escritura bajo la letra "A", y transcribo a continuación: =========================
======================== CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. ========================
================ ASAMBLEA GENERAL EXTRAORDINARIA DE ACCIONISTAS ==================
== 08 de diciembre de 2009 ==================
==== En la Ciudad de Monterrey, Nuevo León, domicilio social de Christus Muguerza Hospitales, S.A. de C.V. (la Sociedad), siendo las 09:00 horas del día 08 de diciembre del 2009 se reunieron en las oficinas del domicilio social de la Sociedad, las personas que constan en la Lista de Asistencia que por separado se levantó, cuyo original se agrega al expediente para que se tenga como parte integral del mismo, el cual se forma con motivo de la presente Asamblea, todas ellas en su calidad de Accionistas de la Sociedad, con el objeto de celebrar esta Asamblea General Extraordinaria de Accionistas. ==
==== De conformidad con lo establecido en los Estatutos Sociales de la Sociedad, asumieron la Presidencia y la Secretaría los titulares de dichos cargos en el Consejo de Administración, los señores John ... Zlotnik ... y Tomás Cantú González, respectivamente. ==
==== Acto seguido, la Asamblea, a sugerencia del Presidente, designó como Escrutadores a los señores Ing. Fernando H. Ferrara Rivero y Lic. Gregorio F. Martínez Muguerza, a quienes se recomendó procedieran a levantar la correspondiente Lista de Asistencia y verificar el número de acciones legalmente representadas. ====
==== Acto seguido, los designados Escrutadores aceptaron el cargo y en el desempeño de su cometido rindieron la siguiente certificación: "Los suscritos, designados Escrutadores, hacemos constar haber verificado y comprobado que están representadas en esta Asamblea General Extraordinaria de Accionistas de Christus Muguerza Hospitales, S.A. de C.V., en los términos de la lista que antecede 87'315,000 acciones que constituyen el 100% del capital social de dicha Sociedad. Asimismo se hace constar, para los efectos legales a que haya lugar, que de conformidad a los registros de la Sociedad el Registro Federal de Contribuyentes de los accionistas representados son los que arriba se indican, es decir: CMU-980429-GH0 y CMU-980731-... - Monterrey, Nuevo León a 08 de diciembre del 2009.- ESCRUTADOR: Ing. Fernando H. Ferrara Rivero.- ESCRUTADOR: Lic. Gregorio F. Martínez Muguerza.- Firmados". ==
==== Sobre la lectura de la constancia anterior, se acordó que la misma debe agregarse al expediente que se forme con motivo de la presente Asamblea. ===
==== En virtud de encontrarse representada la totalidad de las acciones en que se divide el capital social, el Presidente declaró legalmente instalada esta Asamblea, con plena facultad para resolver sobre los asuntos que la motivan, no obstante de que no se haya publicado convocatoria formal, con lo que estuvieron de acuerdo todos los presentes. ==
==== Acto seguido, el Secretario, por recomendación del Presidente, procedió a la lectura de la Orden del Día: ====
====================================== ORDEN DEL DÍA ==

==== I. PRESENTACION, DISCUSION Y EN SU CASO, APROBACION DEL BALANCE GENERAL DE LA SOCIEDAD AL 30 DE NOVIEMBRE DEL 2009 ==

==== II. ANALISIS, DISCUSION Y EN SU CASO, APROBACION DE UN PROYECTO DE FUSION ENTRE LA SOCIEDAD COMO LA SOCIEDAD FUSIONANTE CON CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V. Y CLINICA REGIONAL ALLENDE, S.A. DE C.V. COMO LAS SOCIEDADES FUSIONADAS, TOMANDOSE AL EFECTO LOS ACUERDOS QUE SE ESTIMEN NECESARIOS ======================================

==== III. DESIGNACION DE LA PERSONA O PERSONAS QUE SE ENCARGUEN DE PROTOCOLIZAR ANTE NOTARIO PUBLICO LOS ACUERDOS VOTADOS, INSCRIBIRLOS EN EL REGISTRO PUBLICO DE COMERCIO Y/O REALIZAR LAS DEMÁS GESTIONES Y TRAMITES QUE RESULTEN NECESARIOS HASTA LOGRAR SU FORMALIZACION ==

==== Acto seguido, se pasó a la consideración y resolución de tales asuntos como sigue: ====================

==== **PRIMER PUNTO DE LA ORDEN DEL DÍA.-** ==

==== En desahogo del primer punto de la Orden del Día, y como antecedente del proyecto de fusión de la Sociedad como la Fusionante con Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V. como las Fusionadas, el Presidente dio lectura al último balance general de la Sociedad, el cual muestra la situación financiera de la Sociedad al 30 de noviembre de 2009, para que el mismo fuese objeto de discusión y, en su caso, de la aprobación correspondiente ===

==== El Secretario puntualizó que en caso de aprobarse el balance general anteriormente expuesto, y en caso de aprobarse la fusión que se discutirá como el segundo punto de la Orden del Día, será necesario publicar el balance general de la Sociedad con cifras al 30 de noviembre de 2009 en el Periódico Oficial del Estado de Nuevo León ==

==== Después de amplia deliberación sobre las ventajas y desventajas del proyecto de fusión planteado, los Accionistas manifestaron su conformidad al respecto y, acto seguido, ante una moción debidamente presentada y secundada, la Asamblea de Accionistas de la Sociedad por unanimidad de votos adoptó la siguiente ========

================================ R E S O L U C I O N : ================================

==== **1. Se aprueba el balance general de la Sociedad, el cual muestra la situación financiera de la Sociedad con cifras al 30 de noviembre del 2009, mismo que se acuerda adjuntar al expediente que se forme por motivo de la presente Asamblea como Anexo "A", formando parte integral del mismo.** =======

==== **SEGUNDO PUNTO DE LA ORDEN DEL DÍA.-** ==

==== En relación con el segundo punto de la Orden del Día, el Presidente expuso a los presentes los argumentos y beneficios de fusionar por incorporación a la Sociedad en calidad de Fusionante, con las sociedades denominadas Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V. en calidad de Fusionadas, y sometió a consideración de los presentes el proyecto que contiene los términos, bases y condiciones con las cuales se llevará a cabo la fusión ==

==== Continuó manifestando el Presidente que en caso de aprobarse la fusión y aceptarse los términos, bases y condiciones anteriormente mencionados, es indispensable celebrar un Convenio de Fusión. A continuación, el Secretario hizo entrega a cada uno de los presentes el proyecto de Convenio de Fusión, en cuyo texto incorpora substancialmente los mismos términos, bases y condiciones para llevarse a cabo dicha fusión =============

==== Después de amplia deliberación sobre las ventajas y desventajas del proyecto de fusión planteado, los Accionistas manifestaron su conformidad al respecto y, acto seguido, ante una moción debidamente presentada y secundada, la Asamblea de Accionistas de la Sociedad por unanimidad de votos adoptó las siguientes =======

================================ R E S O L U C I O N E S : ================================

==== **2. Se resuelve autorizar la fusión por incorporación, en la cual la Sociedad subsiste y asume el carácter de Fusionante (la "Fusionante"), y las sociedades Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V. (las "Fusionadas") se extinguen y asumen el carácter de Fusionadas.** ==

==== **3. Se acepta, resuelve y aprueba que la fusión a que se refiere la resolución inmediata anterior se realice en los términos, bases y condiciones propuestos en el proyecto de fusión, los cuales se transcriben a continuación:** ===

==== **a).- Para todos los efectos legales a que haya lugar, la sociedad Christus Muguerza Hospitales, S.A. de C.V. se fusiona por incorporación con las sociedades Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V., subsistiendo la primera y asumiendo el carácter de Fusionante, y las segundas se extinguen y asumen el carácter de Fusionadas** ================================

==== b).- Las cifras que servirán de base para realizar la fusión son las que arrojan los balances generales de la Fusionante y las Fusionadas, los cuales contienen cifras al día 30 de noviembre del 2009; asimismo, se aprueba que el balance general pro forma de la Fusionante al 08 de diciembre del 2009, el cual refleja la situación financiera aproximada de la Fusionante, después de la consolidación de los patrimonios en virtud de la fusión, mismos documentos que se acuerdan adjuntar al expediente que se forme con motivo de la presente Asamblea como Anexos "A", "B", "C" y "D" respectivamente. ========
==== c).- De conformidad a lo establecido el Artículo 225 de la Ley General de Sociedades Mercantiles, se hace constar que todos los acreedores han otorgado su consentimiento para efectos de la fusión y en todo caso, para el supuesto de existir algún otro acreedor no identificado a la fecha, se acuerda el pago de sus deudas, por lo que la fusión surtira efectos en la fecha en que las resoluciones adoptadas por las Asambleas Generales Extraordinarias de los Accionistas de la Fusionante y Fusionadas se formalicen ante Notario Público y se inscriban en el Registro Publico de la Propiedad y del Comercio de los domicilios sociales de las sociedades fusionadas. ==
d).- En virtud de la fusión, la Fusionante asumira sin reserva ni limitación alguna todos los activos, derechos, pasivos, obligaciones y responsabilidades de cualquier naturaleza y, en general, todo el patrimonio que les corresponde y pertenece a las Fusionadas, pasará a título universal al patrimonio de la Fusionante. En virtud de lo anterior, la Fusionante asumirá la propiedad y dominio directo sobre todos los activos y derechos de las Fusionadas y sera responsable por todos los pasivos, obligaciones y responsabilidades contraídos por las Fusionadas, a traves de distintos actos jurídicos tales como contratos, convenios, licencias, permisos, concesiones, o derivados de cualquier otro acto u operación celebrado por las Fusionadas, inclusive las de caracter laboral, de seguridad social, caracter fiscal, mercantil o civil. Asimismo, los activos y pasivos de las Fusionadas quedarán inscritos y asentados en los libros de la Fusionante, al mismo valor que fueron inscritos y asentados en los libros de las Fusionadas. ==
==== e).- De conformidad a establecido en el Artículo 223 de la Ley General de Sociedades Mercantiles, debera inscribirse en el Registro Publico de la Propiedad y del Comercio y publicarse en el Periódico Oficial de los domicilios sociales de la Fusionante y Fusionadas las resoluciones adoptadas por las Asambleas Generales Extraordinarias de los Accionistas de la Fusionante y Fusionadas, así como sus respectivos balances generales con cifras al día 30 de noviembre del 2009. =======================
==== f).- Como consecuencia de la fusión los funcionarios, apoderados y/o representantes jurídicos de las Fusionadas, deberán cesar sus funciones y actividades, revocándose para todos los efectos todos y cada uno de los poderes otorgados por las sociedades Fusionadas, una vez que surta efectos la fusión entre la Fusionante y las Fusionadas. ==
==== g).- En virtud de la fusión, la Fusionante deberá aumentar el capital social en su parte variable en la cantidad de $11'000,000.00 (Once millones de pesos 00/100 M.N.), mediante la emisión de 11'000,000 (once millones) de acciones ordinarias, nominativas, Serie "B-1", con valor nominal de $1.00 (Un peso 00/100 Moneda Nacional), cada una de ellas, y entreguense a los accionistas canjeándose los anteriores titulos accionarios representativos del capital social de las Fusionadas, quedando la estructura y tenencia accionaria de la Fusionante como a continuacion se muestra: ========================

ACCIONISTA	ACCIONES FIJO SERIE "A"	ACCIONES VARIABLE SERIE "B"	ACCIONES VARIABLE SERIE B-1 FUSIÓN	VALOR NOMINAL	VALOR TOTAL
CHRISTUS MUGUERZA, S.A.P.I. DE C.V.	49,999	87'265,000	10'998,000	$1.00	$98'312,999.00
CORPORACIÓN MUGUERZA, S.A.P.I. DE C.V.	1			$1.00	$1.00
SERVICIOS ADMINISTRATIVOS CYMEX CO, S.A. DE C.V.			2,000	$1.00	$2,000.00
TOTALES	50,000	87'265,000	11'000,000		$98'315,000.00

==== h).- La Fusionante deberá conservar los libros sociales y registros contables de las Fusionadas y deberá cumplir con los avisos y notificaciones que sean necesarios ante las autoridades correspondientes. ==

==== i).- La Fusionante y Fusionadas se someterán a la jurisdicción de los Tribunales Competentes de la Ciudad de Monterrey, Nuevo León, México, renunciando a cualquier otra jurisdicción que les pudiere corresponder con motivo de sus domicilios presentes o futuros, o por cualquier otra causa - ========

==== 4. Se resuelve y aprueba que la Fusionante en unión con las Fusionadas celebre el Convenio de Fusión en los términos, bases y condiciones acordados en el punto 3 anterior y de conformidad al proyecto presentado por el Secretario, el cual se acuerda adjuntar al expediente que se forme por motivo de la presente Asamblea como Anexo "E". ==

==== III.- TERCER PUNTO DE LA ORDEN DEL DÍA.- ==

==== Con relación al último punto de la Orden del Día el Presidente sugirió a la Asamblea el nombrar Delegados Especiales para que formalicen las resoluciones adoptadas por la presente Asamblea ===================

==== Después de una moción debidamente hecha y secundada la Asamblea de Accionistas de la Sociedad por unanimidad de votos tomó la siguiente ===

==================================== RESOLUCIÓN ====================================

==== 5. Se designa a los señores Arturo Gerardo Garza Buerón, Constantino Federico Padilla Gonzalez Alejandro Canavati Marcos, Adolfo Javier González Gonzalez Rogelio Segovia González, Ing. Fernando Humberto Ferrara Rivero, Tomás Cantú González y Lic. Ivonne Alexandra Elizondo de la Garza, Delegados Especiales de esta Asamblea, para que conjunta o individualmente cualquiera de ellos a) Ocurran ante Notario Público de su elección a protocolizar la presente acta; b) Firmen, ratifiquen y formalicen el Convenio de Fusión celebrado entre la Sociedad y Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V.; c) Publiquen en el Periódico Oficial del Estado de Nuevo León, los acuerdos de fusión así como el balance general con cifras al 30 de noviembre del 2009; d) Inscriban el Registro Público de la Propiedad y del Comercio del domicilio de la Sociedad, (i) el primer testimonio de la escritura que contenga la protocolización de esta acta, con los Anexos que sean necesarios, (ii) el Convenio de Fusión celebrado entre la Sociedad y Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V., y (iii) las publicaciones en el Periódico Oficial de los acuerdos de fusión y balance general con cifras al 30 de noviembre del 2009; e) Presenten el aviso de fusión ante la Secretaría de Hacienda y Crédito Público así como ante todas las autoridades que conforme a la Ley deban ser notificadas de la misma; y, f) En general, otorguen cualquier otro documento o realicen cualquier otro acto necesario o conveniente para que las resoluciones adoptadas por esta asamblea surtan plenos efectos. ==

==== Con todo lo cual se tuvo por desahogada la Orden del Día. La Presidencia dio las gracias a los presentes por su asistencia y acuerdos votados ==

==== Se hace constar que a partir de la instalación y hasta antes de la suspensión de la Asamblea para la redacción del acta, estuvieron presentes o representados los accionistas tenedores del 100 % de las acciones en que se divide el capital social de la Sociedad ==

==== Se suspendió la Sesión para la preparación de la presente acta, reanudándose posteriormente para ser leída y la misma firmando la presente acta el Presidente, el Secretario y Comisario ===================

===== PRESIDENTE JOHN L. ZAPRICH II HOLLER ==== RUBRICA ===== SECRETARIO TOMAS CANTU GONZALEZ ==== RUBRICA ==== COMISARIO C.P. LEOPOLDO REYES MONTANO ==== RUBRICA ===

==== FUNDADO EN LO EXPUESTO el compareciente señor LICENCIADO ROGELIO SEGOVIA GONZALEZ como Delegado especial de la Asamblea General Extraordinaria de Accionistas de CHRISTUS MUGUERZA HOSPITALES S.A. DE C.V. otorga las siguientes ==

================================ C L A U S U L A S ================================

==== PRIMERA - Queda protocolizada para todos los efectos legales a que hubiere lugar el acta de Asamblea General Extraordinaria de Accionistas de CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. celebrada el día (8) ocho de Diciembre del (2009) dos mil nueve, lo cual ha quedado transcrita en el cuerpo del presente instrumento, la cual se tiene aquí por reproducida como si se insertase a la letra ========================

=== SEGUNDA - Con motivo de lo anterior queda formalizado, en los términos y condiciones previstos en el acta que ha quedado protocolizada, (i) la aprobación del Balance General de la sociedad al 30 treinta de Noviembre del 2009 dos mil nueve; (ii) la aprobación de la fusión de la sociedad, como sociedad fusionante, con las sociedades Christus Muguerza Conchita, S.A. de C.V. y Clínica Regional Allende, S.A. de C.V. como Sociedades Fusionadas ==

==== TERCERA.- La designación de delegado especial el señor LICENCIADO ROGELIO SEGOVIA GONZÁLEZ ===

=========================== P E R S O N A L I D A D ==================================

==== El compareciente señor LICENCIADO ROGELIO SEGOVIA GONZÁLEZ acredita el carácter con que comparece, la existencia y subsistencia legal de la sociedad CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V., con la siguiente documentación ==

==== A.- Acta de la Asamblea General Extraordinaria de Accionistas de la sociedad denominada CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. de fecha 18 dieciocho de Diciembre de (2009) dos mil nueve, que fue objeto de la protocolización a que se refiere el presente instrumento notarial, misma que se tienen aquí por reproducida como si se insertase a la letra ===

==== B.- EN CUANTO A LA EXISTENCIA Y SUBSISTENCIA DE SU REPRESENTADA =================

==== 1.- Con Primer Testimonio de la Escritura Pública Número (30,513) treinta mil quinientos trece de fecha 20 veinte del mes de Octubre del Año (2003) dos mil tres, ante la fe del Licenciado Evaristo Ocañas Méndez, Notario Público Titular de la Notaría Pública número 51 cincuenta y uno, con ejercicio en el Primer Distrito Registral en el Estado de Nuevo León, inscrita bajo el número 11228 once mil doscientos veintiocho, volumen 4 cuarto, libro primero de fecha (7) siete de Noviembre del (2003) dos mil tres, en el Registro Público de la Propiedad y del Comercio de Monterrey, Nuevo León, la cual contiene la CONSTITUCIÓN DE LA SOCIEDAD DENOMINADA CHRISTUS MUGUERZA SUR, S.A. DE C.V. ===============================

==== 2.- Con Primer Testimonio de la Escritura Pública Número (1361) mil trescientos sesenta y uno de fecha 16 dieciséis del mes de Diciembre del (2008) dos mil ocho, pasada ante la fé del Suscrito Notario, e inscrita bajo el Folio Mercantil Número (86694*1) ochenta y seis mil seiscientos noventa y cuatro asterisco uno de fecha (7) siete de Enero de (2009) dos mil nueve, en el Registro Público de la Propiedad y del Comercio de Monterrey, Nuevo León, la cual contiene la PROTOCOLIZACIÓN DE LA ASAMBLEA EXTRAORDINARIA DE ACCIONISTAS DE LA SOCIEDAD DENOMINADA CHRISTUS MUGUERZA SUR, S.A. DE C.V., en la cual se acordó entre otros asuntos el cambio de denominación social por el de HOSPITALES CHRISTUS MUGUERZA, S.A DE C.V. ==

==== 3.- Con Primer Testimonio de la Escritura Pública Número (1426) mil cuatrocientos veintiséis de fecha (26) veintiséis del mes de Febrero de (2009) dos mil nueve, pasada ante la fe del Suscrito Notario, e inscrita bajo el Folio Mercantil Número (86694*1) ochenta y seis mil seiscientos noventa y cuatro asterisco uno de fecha (10) diez de Marzo del (2009) dos mil nueve, en el Registro Público de la Propiedad y del Comercio de Monterrey, Nuevo León, la cual contiene la PROTOCOLIZACIÓN DE LA ASAMBLEA EXTRAORDINARIA DE ACCIONISTAS DE LA SOCIEDAD DENOMINADA HOSPITALES CHRISTUS MUGUERZA, S.A. DE C.V., en la cual se acordó entre otros asuntos el cambio de denominación social por el de CHRISTUS MUGUERZA HOSPITALES, S.A DE C.V. ==

==== De dichos documentos, Yo el Notario doy fe de tener a la vista y transcribo en lo conducente a la letra como sigue ==

================================ E S T A T U T O S ================================

================================ CAPITULO PRIMERO ================================

================ DENOMINACION, OBJETO, DOMICILIO, DURACION Y NACIONALIDAD ============

==== ARTICULO PRIMERO. La Sociedad es de naturaleza mercantil y se denominará CHRISTUS MUGUERZA HOSPITALES, dicha denominación se usará seguida de las palabras SOCIEDAD ANONIMA DE CAPITAL VARIABLE o su abreviatura S.A. de C.V. ==== ARTICULO SEGUNDO. La Sociedad tendrá por objeto: (1) Promover el servicio curativo y sanativo en el área de la salud con espíritu Cristiano, manteniendo la visión de los fundadores y con especial interés en las personas desvalidas y de escasos recursos económicos. Los servicios que promueva y provea la Sociedad de acuerdo con lo señalado en estos Estatutos se sujetarán en todo momento a las leyes Mexicanas y con ningún motivo la Sociedad se ostentará como una asociación religiosa o ministro de culto. ==== (2) Promover, construir, organizar, explotar, adquirir y tomar en arrendamiento en todo género de hospitales, clínicas de salud, sanatorios, así como departamentos para auxiliares de diagnóstico incluyendo en forma enunciativa y no limitativa, laboratorios, rayos "X", quimioterapia, oncología, farmacia, oftalmología, dermatología y demás departamentos clínicos ubicados en establecimientos hospitalarios, tales como tiendas de regalos y cafetería del hospital, así como participar en la administración u operación de los mismos ==== 3. Adquirir bajo cualquier título legal acciones, intereses, participaciones o partes sociales de cualquier tipo de personas morales o entidades, ya sea formando parte de su constitución o mediante adquisición posterior, así como enajenar, vender, disponer y negociar tales acciones, participaciones y partes sociales incluyendo cualquier otro título-valor ==== 4. Recibir de otras sociedades y/o personas, así como prestar o proporcionar a otras entidades y personas, cualquier servicio que sea necesario para el logro de sus finalidades u objetos sociales, incluyendo en forma enunciativa y no limitativa: servicios administrativos, financieros, de tesorería, mercadotecnia, preparación de balances y presupuestos, elaboración de programas y manuales, análisis de resultados de operación, evaluación de información sobre productividad y de posibles financiamientos, preparación de estudios acerca de la disponibilidad de capital y asistencia técnica ==== 5. Obtener, desarrollar, contratar, comercializar, mejorar, utilizar, registrar, recibir licencias, otorgar o adquirir bajo cualquier título legal toda clase de patentes, marcas, certificados de invención, nombres comerciales, modelos de utilidad, diseños industriales, secretos industriales y cualesquiera otros derechos de propiedad industrial, así como derechos de autor, opciones sobre ellos y preferencias, ya sea en México o en el extranjero ==== 6. Obtener toda clase de préstamos o créditos, emitir obligaciones, bonos, papel comercial y cualquier otro título de crédito o instrumento equivalente, sin o con el otorgamiento de garantía real específica, mediante prenda, hipoteca, fideicomiso o bajo cualquier otro título legal; así como otorgar cualquier tipo de financiamiento o préstamo a sociedades mercantiles o civiles, empresas e instituciones con las que la Sociedad tenga relaciones de negocios o participaciones sociales, recibiendo o no garantías reales o personales específicas ==== 7. Otorgar y recibir toda clase de garantías personales, reales y avales a cargo de sociedades, asociaciones o instituciones en las que la Sociedad tenga relaciones de negocios o participaciones sociales, pudiéndose constituir en fiadora, avalista, garante y/o obligado solidario con respecto a cualquiera de tales personas ==== 8. Suscribir, emitir, girar, avalar, aceptar y endosar toda clase de títulos de crédito o valor mobiliario que la ley permita ==== 9. Construir, administrar, supervisar, arrendar o poseer inmuebles, por cuenta propia o de terceros, con respecto a toda clase de edificaciones o instalaciones para oficinas o negocios que sean necesarias o convenientes para su objeto social o para las operaciones u objetos sociales de las sociedades mercantiles o civiles, asociaciones o instituciones en las que la Sociedad tenga relaciones de negocios o participaciones sociales ==== 10. Dar o tomar en arrendamiento o en comodato, adquirir, poseer, permutar, enajenar, transmitir, disponer o gravar la propiedad o posesión de toda clase de bienes muebles e inmuebles necesarios o convenientes para su objeto social o para las operaciones u objetos sociales de las sociedades mercantiles o civiles, asociaciones e instituciones en las que la Sociedad tenga relaciones de negocios o participaciones sociales ==== 11. Actuar como comisionista, mediador, representante, distribuidor o intermediario de cualquier persona o sociedad que tenga relaciones de negocios o participaciones sociales con la Sociedad ==== 12. La producción, transformación, adaptación, importación, exportación, almacenamiento y la compraventa por cualquier título al mayoreo o menudeo de maquinaria, refacciones, materiales, materias primas, productos industriales, efectos y mercaderías de todas clases, nacionales o extranjeros, así como negociar con ellos por comisión ==== Promover, desarrollar e implementar todo tipo de actividades culturales, de asesoría, capacitación y consulta por cuenta propia o de terceros, cuando dichas actividades se relacionen con este objeto social ==== 13. Extender el ministerio sanador de Jesucristo ==== 14. Realizar todos los actos, contratos y operaciones en general, la celebración y ejecución de todos aquellos actos jurídicos que sean indispensables, necesarios, apropiados, provechosos o conducentes a los fines sociales ==== ARTÍCULO TERCERO. El domicilio social de la Sociedad es la Ciudad de Monterrey, Estado de Nuevo León, México. La Sociedad podrá establecer sucursales, agencias u oficinas en otros lugares de la República Mexicana o en el extranjero, así como someterse convencionalmente por cualquier acto o convenio a la aplicación de leyes extranjeras o de cualquier estado de la República Mexicana y a las respectivas jurisdicciones de los tribunales competentes que correspondan a domicilios convencionales en México o en el extranjero, por lo que podrá recibir toda clase de notificaciones o emplazamientos judiciales o extrajudiciales a través de apoderado especial o general que la Sociedad haya designado para tales efectos ==== ARTÍCULO CUARTO. La duración de la Sociedad es de noventa y nueve (99) años a partir de su constitución formalizada en la presente escritura ==== ARTÍCULO QUINTO. ESTA SOCIEDAD ES MEXICANA CON CLÁUSULA DE ADMISIÓN DE EXTRANJEROS. En tal virtud, en los términos de lo que disponen los artículos 15 de la Ley de Inversión Extranjera y 14 de su Reglamento, cualquier extranjero que llegue a adquirir un interés o participación social en la Sociedad quedará obligado a considerarse como nacional respecto de: (1) Las acciones, partes sociales o derechos que adquiera en la Sociedad; (2) Los bienes, derechos, concesiones, participaciones o intereses de que sea titular la Sociedad; (3

Los derechos y obligaciones que deriven de los contratos en que sean parte la propia Sociedad. Asimismo los extranjeros que lleguen a adquirir intereses o participación social en esta Sociedad automáticamente renunciarán a invocar la protección de sus gobiernos bajo la pena, en caso contrario, de perder en beneficio de la Nación Mexicana los derechos y bienes que hubiesen adquirido. ==

=============================== CAPITULO SEGUNDO ===============================

======================= DEL CAPITAL SOCIAL Y LAS ACCIONES =======================

==== ARTICULO SEXTO. El capital social es variable. La parte mínima fija no sujeta a retiro es la cantidad de $50,000.00 (CINCUENTA MIL PESOS 00/100 MONEDA NACIONAL), representado por 50,000 (CINCUENTA MIL) acciones de la Serie "A" ordinarias nominativas, con valor nominal de $1.00 (UN PESO 00/100 MONEDA NACIONAL), suscritas y pagadas, que integrarán la serie A y subseries numéricamente progresivas. El capital variable será ilimitado y estará representado por acciones de la serie B y subseries numéricamente progresivas que también serán nominativas y cuyo valor nominal será fijado por la Asamblea respectiva. Las acciones representativas del capital social variable podrán ser ofrecidas para su suscripción por resolución de la Asamblea General Ordinaria de Accionistas. ==== Las acciones de la Sociedad (en lo sucesivo se les denominará las "Acciones") podrán ser adquiridas o suscritas por Mexicanos o extranjeros (en lo sucesivo se denominará a los accionistas de la Sociedad "los Accionistas"). ==== ARTICULO SEPTIMO. Los títulos definitivos o los certificados provisionales que representen a las Acciones podrán amparar una o más Acciones, indicarán la serie y clase de las Acciones que representen, contendrán las menciones que requiera el Artículo ciento veinticinco de la Ley General de Sociedades Mercantiles y serán firmados por el Presidente y otro Consejero de la Sociedad. ====ARTICULO OCTAVO. El capital social podrá reestructurarse si así conviene a los intereses de la Sociedad, trasladando la porción de su capital fijo a la parte variable y de la parte variable a la fija, siempre y cuando no se disminuya el capital mínimo fijo de la Empresa, llevándose a cabo lo anterior mediante Asamblea Ordinaria de Accionistas. ==== ARTICULO NOVENO. Los aumentos y reducciones del capital social se sujetarán a lo siguiente: ==== (1) Los aumentos y reducciones en la parte mínima fija sin derecho a retiro del capital social de la Sociedad se efectuarán mediante resolución de la asamblea general extraordinaria de Accionistas de la Sociedad, debiéndose en consecuencia reformar estos Estatutos. ==== (2) Los aumentos y reducciones en la parte variable del capital social de la Sociedad se efectuarán mediante resolución de la asamblea general ordinaria de Accionistas de la Sociedad. ==== (3) Los Accionistas tendrán derecho preferente, en proporción al número de sus Acciones, para suscribir las Acciones que se emitan en caso de aumento del capital social. Este derecho deberá ejercerse dentro de los quince (15) días de calendario siguientes a la publicación en el periódico oficial y/o en otro de amplia circulación en el domicilio de la Sociedad, de la resolución de los Accionistas sobre el aumento de capital social. ==== (5) Los Accionistas no estarán obligados a realizar contribuciones adicionales a la Sociedad a menos que así lo acuerden por escrito. ==== (6) El porcentaje de participación en el capital social de la Sociedad de algún Accionista podrá verse disminuido cuando dicho Accionista opte por no suscribir alguna contribución de capital que haya sido debidamente aprobada y que cualquier otro Accionista suscriba. El porcentaje de participación en el capital social de la Sociedad de algún Accionista podrá verse incrementado cuando la Sociedad amortice Acciones de otro Accionista. ==== ARTICULO DECIMO. Excepto por lo señalado en el inciso (3) del Artículo Noveno de estos Estatutos, los aumentos de capital social mediante capitalización de pago en efectivo o en especie que haga la Sociedad a sus Accionistas, o mediante la capitalización de pasivos a cargo de la Sociedad, deberán hacerse de tal forma que se conserve el mismo porcentaje de participación en el capital social de la Sociedad de cada uno de los Accionistas. ==== ARTICULO DECIMO PRIMERO. Esta Sociedad deberá inscribirse en el Registro Nacional de Inversiones Extranjeras, cuando exista participación de la inversión extranjera, en los términos de la Ley de la materia y en su caso deberá obtener su constancia de inscripción y renovarla anualmente mientras permanezca la inversión extranjera. En todo caso, la inversión extranjera se ajustará a los porcentajes y condiciones que establece la Ley de Inversión Extranjera, en especial si esta Sociedad modifica su objeto social. ==== ARTICULO DECIMO SEGUNDO. De acuerdo con los artículos ciento veintiocho y ciento veintinueve de la Ley General de Sociedades Mercantiles, la Sociedad tendrá un registro de Acciones que contendrá el nombre, nacionalidad, domicilio, número telefónico, dirección de correo electrónico y número de facsímile de cada Accionista, la indicación de las Acciones de que sea titular, así como los números, series, clases y demás particularidades, e igualmente indicará las exhibiciones que se efectúen. Será obligación de cada Accionista el notificar oportunamente y por escrito al Secretario del Consejo de cualquier cambio en su domicilio, número telefónico, dirección de correo electrónico y/o número de facsímile. ==== La Sociedad también llevará un Libro de Registro de Variaciones de Capital en el cual se registre cualquier aumento o disminución del capital social de la Sociedad, de acuerdo con el artículo doscientos diecinueve de la Ley General de Sociedades Mercantiles. ==== El Libro de Registro de Acciones y el Libro de Registro de Variaciones de Capital serán debidamente llevados y custodiados por el Secretario del Consejo de Administración de la Sociedad (en lo sucesivo se le denominará el "Secretario"). ==== La Sociedad únicamente considerará como titular legítimo de Acciones a quien aparezca inscrito como Accionista en el Libro de Registro de Acciones en los términos del artículo ciento veintinueve de la Ley General de Sociedades Mercantiles. ==== ARTÍCULO DÉCIMO TERCERO. El Secretario únicamente registrará en el Libro de Registro de Acciones a aquellos Accionistas que se presenten en la Secretaría del Consejo de Administración de la Sociedad y muestren al Secretario o a la persona que éste designe el título o los títulos originales de las Acciones debidamente endosados, y le comprueben haber retenido o enterado, en caso de que así proceda, el impuesto sobre la renta causado por la cesión o transferencia de sus Acciones o haber recibido copia del dictamen respectivo que exijan las leyes fiscales aplicables. ==== Adicionalmente, el Secretario no hará para la inscripción correspondiente sin antes verificar que las cesiones o transferencias de Acciones se han llevado a cabo en cumplimiento con lo establecido en el Capítulo Tercero de estos Estatutos. ==== ARTÍCULO DÉCIMO CUARTO. El Accionista que sufra el extravío o robo de un título o certificado que represente una o varias Acciones, podrá solicitar la reposición del mismo siguiendo el procedimiento que establezcan las leyes de la materia, en cuyo caso correrán por su cuenta todos los gastos que se deriven de dicho procedimiento, y la Sociedad quedará libre de toda responsabilidad por reclamaciones o contiendas futuras que pudieran suscitarse como consecuencia de dicho extravío o robo. ===== == CAPÍTULO TERCERO ==================================== ========================= DE LA TRANSMISIÓN DE LAS ACCIONES ======================== ==== ARTÍCULO DÉCIMO QUINTO. Cualquier Accionista tiene el derecho a vender, permutar, donar, transmitir, enajenar, ceder, transferir, dar en legado o herencia, prenda o garantía sus Acciones (en lo sucesivo se le denominará la "Cesión"), sujetándose a las siguientes reglas: ==== (1). Toda Cesión de Acciones se considerará como hecha con y sin reserva alguna en contra de la Sociedad. Consiguientemente, la persona que adquiera una o varias Acciones asumirá todos los derechos y obligaciones de su cedente para con la Sociedad. ==== (2). Toda persona que tenga el carácter de Accionista de la Sociedad, por el solo hecho de serlo, acepta que para el caso de venta de las Acciones de su propiedad, otorga un derecho de preferencia en favor de los demás Accionistas en proporción a las Acciones de que éstos sean tenedores. ==== (3). Para el efecto anterior, el Accionista que desee vender sus Acciones, deberá notificar por escrito al Secretario del Consejo de Administración el número de Acciones que desea vender, el nombre de la persona a quien desea vender dichas Acciones, el precio y condiciones de pago. ==== (4). Dentro de los 30 treinta días siguientes a la fecha en que reciba dicha notificación, el Secretario del Consejo de Administración dará aviso de la solicitud de la venta a los demás Accionistas de la Sociedad por telegrama, correo certificado con acuse de recibo o de cualquier otro medio fehaciente, y fijará un plazo de 30 treinta días naturales siguientes a la fecha en que se haya notificado a los Accionistas dicha comunicación para que éstos manifiesten si desean hacer uso total o parcial de su derecho en relación con las Acciones ofrecidas. ==== (5). Los Accionistas de la Sociedad podrán ejercer su derecho de preferencia a un precio y bajo condiciones de pago equivalentes a los reflejados en la notificación de referencia. ==== (6). Los derechos de aquellos Accionistas que renuncien expresamente a ello o que no lo hayan ejercido dentro de los 30 treinta días siguientes al plazo antes mencionado, acrecerá a los demás Accionistas que en el informe hayan manifestado expresamente su deseo de hacer valer dichos derechos preferenciales. ==== (7). En el caso de que transcurra el plazo para ejercitar el derecho de preferencia, sin que el Secretario del Consejo de Administración haya recibido contestación por escrito de ninguno de los Accionistas de acuerdo con la manera antes indicada, el Secretario del Consejo de Administración dentro de los 10 diez días naturales siguientes dará aviso por escrito al Accionista enajenante quien podrá disponer de sus Acciones en la forma mencionada en su notificación dirigida al Secretario del Consejo de Administración, dentro de los 30 treinta días naturales siguientes a la fecha en que hubiere recibido la notificación del Secretario del Consejo de Administración. ==== (8). Los avisos, comunicaciones y notificaciones que se hagan a los Accionistas en los términos de este Capítulo deberán dirigirse a los domicilios declarados por dichos Accionistas a la Sociedad y que consten en el Libro de Registro de Acciones de la misma. ==== (9). Cualquier Cesión que se lleve a cabo en violación a lo dispuesto en este Capítulo será nula absoluta y no producirá efectos legales. === == CAPÍTULO CUARTO === ========================= DE LAS ASAMBLEAS DE ACCIONISTAS ========================

====ARTICULO DECIMO SEXTO. La asamblea general de Accionistas es el órgano supremo de la Sociedad y sus decisiones se toman o adoptan de acuerdo con lo establecido en estos Estatutos. Dichas decisiones tomadas legalmente obligan a todos los Accionistas, incluso a los ausentes y disidentes. ==== ARTICULO DECIMO SEPTIMO. Las asambleas generales de Accionistas serán extraordinarias u ordinarias. Serán asambleas extraordinarias de Accionistas las convocadas para tratar cualquiera de los asuntos indicados en el artículo ciento ochenta y dos de la Ley General de Sociedades Mercantiles. Todas las demás asambleas generales de Accionistas serán ordinarias. Para efectos de la Sociedad y de estos Estatutos, los siguientes asuntos se considerarán "Asuntos Relevantes" y necesariamente se deberán tratar y resolver en Asamblea General Ordinaria de Accionistas: ==== (1) La transferencia de todos o substancialmente todos los activos de la Sociedad. ==== (2) La renta, transferencia o adquisición de activos o acciones de alguna persona física, persona moral o entidad cuando dicha operación no haya sido prevista en forma específica en el plan anual de negocios de la Sociedad, y/o cuando el importe total de la operación u operaciones relacionadas, ya sea el importe total en lo individual o en su conjunto, tomando en consideración todas las actividades relacionadas con dicha operación en un plazo de doce meses, sea por un monto superior al equivalente a CINCO MILLONES DE DOLARES, Moneda de los Estados Unidos de América. ==== (3) La celebración, modificación o terminación de cualquier convenio de carácter material o relevante para la Sociedad. ==== (4) La celebración, modificación o terminación de contratos individuales de trabajo o de convenios de terminación de la relación laboral con el Director General. ==== (5) La celebración, modificación o terminación de cualquier tipo de convenio u operación con cualquier Accionista, Consejero, miembro del Cuerpo de Directores, funcionario o empleado de la Sociedad, pariente de las personas señaladas anteriormente o cualquier persona moral o entidad en la que dichas personas tengan algún interés. ==== (6) La contratación de un despacho o firma de contadores que proporcione servicios de auditoría externa distinto al contratado por el Accionista mayoritario de la Sociedad. ==== (7) La contratación de algún abogado, despacho o firma de abogados que proporcione servicios legales distintos al contratado por el Accionista mayoritario de la Sociedad. ==== (8) La adopción de cualquier plan de negocios, incluyendo el plan anual de negocios, y presupuesto (operativo o de capital) de la Sociedad, así como la modificación de dichos planes de negocios o presupuestos, o la adopción de resoluciones o medidas que resulten incongruentes con los presupuestos o planes de negocios aprobados por la Sociedad. ==== (9) El otorgamiento de cualquier garantía o la constitución de cualquier gravamen sobre cualquier activo de la Sociedad. ==== (10) La celebración de cualquier operación o series de operaciones por las cuales las deudas o pasivos de la Sociedad excedan de 0.30 (CERO PUNTO TRES CERO) de la relación o proporción de pasivos con respecto al capital contable de la Sociedad. ==== (11) Promover, allanarse, admitir responsabilidad o abstenerse a contender un procedimiento judicial o extrajudicial relativo a alguna controversia o reclamo cuyo monto exceda del equivalente a DOSCIENTOS CINCUENTA MIL DOLARES, Moneda de los Estados Unidos de América, ya sea en lo individual o en su conjunto. ==== (12) El otorgamiento de poderes generales o especiales para actos de dominio cuando el importe total de la operación u operaciones relacionadas, ya sea el importe total en lo individual o en su conjunto, tomando en consideración todas las actividades relacionadas con dicha operación en un plazo de doce meses, sea por un monto superior al equivalente a CINCO MILLONES DE DOLARES, Moneda de los Estados Unidos de América. ==== (13) La creación, modificación o disolución de cualquier subsidiaria de la Sociedad, la adopción de cualquier resolución o medida que se refiera a los derechos corporativos, económicos u obligaciones de cualquiera de las subsidiarias de la Sociedad. ==== ARTICULO DECIMO OCTAVO. Las convocatorias para asambleas de Accionistas deberán ser hechas por el Consejo de Administración de la Sociedad (en lo sucesivo, el "Consejo de Administración") o por cualquiera de los Comisarios de la Sociedad en los casos en que lo consideren conveniente o en los casos que deban hacerlas en los términos de las disposiciones aplicables de la Ley General de Sociedades Mercantiles. Adicionalmente, los Accionistas tenedores de por lo menos el 33% (TREINTA Y TRES POR CIENTO) del capital social de la Sociedad con derecho a voto podrán pedir por escrito, en cualquier momento, al Consejo de Administración o a cualquiera de los Comisarios, que convoquen a una asamblea de Accionistas para discutir los asuntos que especifiquen en su solicitud y respecto de los cuales deberán gozar del derecho a voto. Si no se hiciese la convocatoria dentro de los quince (15) días de calendario siguientes a la fecha de la solicitud, un Juez de lo Civil o de Distrito del domicilio de la Sociedad la hará a petición de los interesados que representen el 33% (TREINTA Y TRES POR CIENTO) del capital referido, quienes deberán exhibir sus títulos o certificados de Acciones con ese objeto. ==== Cualquier Accionista podrá solicitar que se convoque a una asamblea general ordinaria de Accionistas cuando por cualquier causa (1) faltare la totalidad de los Comisarios en los términos del Artículo ciento sesenta y cinco de la Ley General de Sociedades Mercantiles. (2) En los casos señalados en el Artículo ciento ochenta y cinco de la Ley General de Sociedades Mercantiles. ==== ARTICULO DECIMO NOVENO. Las Asambleas de Accionistas de la Sociedad (en lo sucesivo se les denominará las "Asambleas") y las resoluciones de Accionistas de la Sociedad (en lo sucesivo se les denominará las "Asambleas"), las resoluciones de Accionistas se sujetarán a lo siguiente: ==== (1) Las convocatorias de las Asambleas, ya sean primeras o segundas convocatorias, deberán hacerse mediante la publicación del aviso de la convocatoria y el correspondiente Orden del Día en el Periódico Oficial del domicilio social o en uno de los diarios de mayor circulación del domicilio social, por lo menos con diez (10) días de calendario de anticipación a la fecha fijada para la Asamblea (excepto en caso de Asambleas ordinarias anuales para discutir, aprobar o modificar el informe anual de los administradores, que deberá hacerse por lo menos con (15) quince días de calendario de anticipación). ==== (2) Si todas las Acciones están representadas, podrá celebrarse la Asamblea sin necesidad de previa convocatoria. ==== (3) El aviso de la convocatoria de una Asamblea expresará el día, lugar y hora en que deberá celebrarse la Asamblea y deberá contener la Orden del Día. El aviso de la convocatoria con la Orden del Día deberá estar firmado por la persona o personas que hagan la convocatoria, en el concepto de que si la hiciese el Consejo de Administración bastará con la firma del Presidente, del Secretario o de delegado que a tal efecto designe el Consejo de Administración, y si la hiciese algún Comisario de la Sociedad, bastará con la firma de este último. ==== (4) Las resoluciones tomadas fuera de Asamblea, por unanimidad de los Accionistas que representan la totalidad de las Acciones con derecho a voto o de la categoría especial de acciones de que se trate, en su caso, tendrán para todos los efectos legales, la misma validez que si hubieren sido adoptadas reunidos en Asamblea General o Especial, respectivamente, siempre que se confirme por escrito por la totalidad de los Accionistas. ==== ARTICULO VIGESIMO. Las Asambleas se celebrarán en el domicilio de la Sociedad, salvo caso fortuito o de fuerza mayor. En las Asambleas sólo se resolverán los asuntos comprendidos en la Orden del Día. Si por algún motivo no pudieran tratarse todos los asuntos comprendidos en la Orden del Día en la fecha para la que haya sido convocada la Asamblea, ésta podrá suspenderse y continuarse en los días que acuerde, sin necesidad de nueva convocatoria. ==== ARTICULO VIGESIMO PRIMERO. Los Accionistas que no se encuentren inscritos en el Libro de Registro de Acciones que lleva la Sociedad a la hora señalada para la celebración de la Asamblea, no podrán participar o votar en las Asambleas, ni personalmente ni por apoderado. ==== Para concurrir a las Asambleas y tomar parte en ellas, los Accionistas deberán presentarse en la Secretaría de la Sociedad antes de la celebración de la Asamblea, para verificar que se encuentren inscritos como Accionistas en el Libro de Registro de Acciones que lleva la Sociedad, y previa identificación, el Secretario o la persona que este último designe, una constancia que indique el número de Acciones que represente, y que les servirá como tarjeta de admisión para asistir y participar en la Asamblea. ==== ARTICULO VIGESIMO SEGUNDO. Todo Accionista tiene derecho a asistir a las Asambleas personalmente o por medio de Apoderado General o Especial, bastando para esto una simple carta poder firmada ante dos (2) testigos. No podrán ser mandatarios los Administradores y Comisarios de la Sociedad. Los representantes legítimos, tutores, albaceas y síndicos, podrán concurrir a las Asambleas en nombre de sus representados, justificando su carácter con el documento idóneo para tal efecto. ==== ARTICULO VIGESIMO TERCERO. Los requisitos de presencia y de votación de Acciones en las Asambleas ordinarias y extraordinarias se sujetarán a lo siguiente: ==== (1) Para que una Asamblea general extraordinaria se considere legalmente reunida en virtud de primera convocatoria, deberán estar representadas en ella por lo menos el o los Accionistas titulares del 75% (SETENTA Y CINCO POR CIENTO) del capital social de la Sociedad. ==== (2) Para que una Asamblea general extraordinaria se considere legalmente reunida en virtud de segunda o ulterior convocatoria, deberán estar representadas en ella por lo menos el o los Accionistas titulares de la mayoría del capital social de la Sociedad. ==== (3) Para que las resoluciones tomadas en una Asamblea general extraordinaria se consideren válidas se requiere el voto favorable de por lo menos el o los Accionistas titulares de la mayoría del capital social de la Sociedad. ==== (4) Para que una Asamblea general ordinaria se considere legalmente reunida en virtud de primera convocatoria, deberán estar representadas en ella por lo menos el o los Accionistas titulares del 50% (CINCUENTA POR CIENTO) del capital social de la Sociedad. ==== (5) Para que las resoluciones tomadas en una Asamblea general ordinaria se consideren válidas se requiere el voto favorable de cuando menos el o los Accionistas titulares de la mayoría de las Acciones presentes en dicha Asamblea. ==== (6) Las votaciones de las Asambleas serán económicas y cada Acción da derecho a un voto. ==== ARTICULO VIGESIMO CUARTO. Las Asambleas serán presididas por el Presidente del Consejo de Administración de la Sociedad (en lo sucesivo se le denominará el "Presidente") y a falta de él por la persona que en ese acto designe por mayoría de Acciones presentes en dicha Asamblea. El Presidente nombrará a un[illegible] escrutadores de entre los asistentes para hacer el recuento de las Acciones presentes. ==== Actuará como Secretario en las Asambleas quien ocupe igual cargo en el Consejo de Administración y a falta de él su suplente y a falta del Secretario propietario y de su suplente la persona que al efecto designen para esas Asambleas los Accionistas por mayoría de Acciones presentes en dicha Asamblea. ==== Las actas de Asambleas serán asentadas en un Libro de Actas de Asambleas que al efecto llevará la Sociedad y serán firmadas por quienes actúen como Presidente y Secretario de la Asamblea, así como por los Comisarios que hubieran asistido a la Asamblea. ==== ARTICULO VIGESIMO QUINTO. Los miembros del Consejo de Administración de la Sociedad y los Comisarios de la Sociedad no podrán votar en las deliberaciones relativas a la aprobación de los informes financieros a que se refieren los Artículos 169 ciento sesenta y seis en su fracción IV y 172 ciento setenta y dos de la Ley General de Sociedades Mercantiles. Los Accionistas que en alguna operación determinada tengan por cuenta propia y ajena algún interés contrario al de la Sociedad no podrán votar en las deliberaciones relativas. ==== CAPITULO QUINTO ==== DE LA ADMINISTRACION DE LA SOCIEDAD ==== ARTICULO VIGESIMO SEXTO. La dirección y administración de la Sociedad estará a cargo de un Consejo de Administración integrado por al menos cuatro (4) miembros propietarios y sus respectivos suplentes, en el entendido que estos últimos solamente podrán ejercer funciones como Consejeros, incluyendo la de votar, en ausencia de los Consejeros propietarios. La Asamblea General de Accionistas decidirá si se nombran Consejeros suplentes al efecto de que suplan a los Consejeros propietarios durante la ausencia de los Consejeros propietarios. La Asamblea General de Accionistas decidirá si se nombran Consejeros suplentes al efecto de que suplan a los Consejeros propietarios durante las ausencias temporales o permanentes de estos últimos. Los Consejeros durarán en su cargo un (1) año, podrán ser reelectos o revocados sus nombramientos. Hasta en tanto se realicen nuevos nombramientos y las personas designadas como nuevos Consejeros tomen posesión de sus cargos. ==== La Asamblea al momento de designar a los integrantes del Consejo nombrará entre dichos miembros a las personas que deberán fungir como Presidente y Secretario, en el entendido que el Secretario del Consejo podrá ser o no uno de los Consejeros. ==== Las faltas temporales del Presidente y las del Secretario serán suplidas por la persona que determine la mayoría de los Consejeros presentes. El Presidente del Consejo de Administración cuidará del cumplimiento de estos Estatutos, de los reglamentos de la Sociedad y de la debida ejecución de las resoluciones de la Asamblea y del Consejo. ==== ARTICULO VIGESIMO SEPTIMO. No podrán ser Consejeros, Comisarios o funcionarios de la Sociedad: ==== (1) los que conforme a la ley estén inhabilitados para ejercer el comercio; ==== (2) los que estén en quiebra, concurso o suspensión de pagos; ==== (3) los que hayan incumplido con sus obligaciones o deberes a su cargo y a favor de la Sociedad o cualquier empresa relacionada con la Sociedad; ==== (4) los que tengan litigios en contra de la Sociedad o cualquier empresa relacionada con la Sociedad; ==== (5) los que hayan sido condenados con pena privativa de libertad. ==== Los que después de su nombramiento llegaren a encontrarse en alguno de los casos expresados anteriormente, cesarán de sus cargos y no podrán volver a desempeñar sino mediante nueva elección y habiendo cesado cualquier impedimento. ==== ARTICULO VIGESIMO OCTAVO. El Consejo quedará legalmente instalado con la presencia de la mayoría de sus miembros y sus resoluciones serán válidas si son aprobadas por la mayoría de los Consejeros presentes. En caso de empate, el Presidente de la Sesión no tendrá voto de calidad a que se refiere el Artículo 143 de la Ley General de Sociedades Mercantiles. ==== Las sesiones del Consejo de Administración se celebrarán en el domicilio de la Sociedad o en cualquier otro lugar que acordaren previamente sus Consejeros, dentro o fuera del territorio de la República Mexicana. De toda sesión se levantará acta que será autorizada y firmada por el Presidente y el Secretario de la sesión respectiva, así como por el o los Comisarios que hubieren asistido a la sesión. Todas las actas serán asentadas en un Libro de Actas. Las copias o constancias de las actas de las Asambleas y sesiones del Consejo de Administración, así como de los asientos contenidos en los libros y registros sociales y, en general, de cualquier documento del archivo de la Sociedad podrán ser autorizados y certificados por el Secretario o su suplente, quienes serán delegados permanentes para concurrir ante el Notario o Corredor Público de su elección a protocolizar los acuerdos contenidos en las actas de las Asambleas y sesiones del Consejo de Administración sin requerir de autorización expresa. El Secretario o su suplente se encargará de redactar y consignar en los libros respectivos las actas que contengan los acuerdos de las Asambleas y las sesiones del Consejo de Administración, así como de expedir certificaciones de las mismas y de los nombramientos, firmas y facultades de los funcionarios de la Sociedad. ==== En los términos del último párrafo del Artículo 143 de la Ley General de Sociedades Mercantiles, las resoluciones tomadas fuera de la sesión de Consejo por unanimidad de sus miembros tendrán, para todos los efectos legales, la misma validez que si hubieran sido adoptadas en sesión de Consejo, siempre que se confirmen por escrito por todos los

Consejeros Propietarios. Los acuerdos así tomados se transcribirán en el Libro de Actas con la firma del Presidente y el Secretario, agregándose al apéndice el documento confirmatorio donde conste la unanimidad de votos y la firma de los consejeros propietarios que hayan aprobado la resolución. ==== ARTÍCULO VIGÉSIMO NOVENO. El Consejo deberá reunirse cuando menos una vez durante cada ejercicio social y necesariamente durante los tres (3) tres meses siguientes a la clausura de cada ejercicio social. Las sesiones del Consejo de Administración podrán ser convocadas por el Presidente, el Secretario o por dos de los Consejeros Propietarios, por medio de carta certificada con acuse de recibo, fax, e-mail o cualquier otro medio escrito que acredite válidamente la recepción por parte de los Consejeros cuando menos con diez (10) días de anticipación a la fecha señalada para la celebración de la sesión. En el entendido de que si todos los Consejeros Propietarios o en su caso sus respectivos suplentes estuvieren presentes, la sesión del Consejo se considerará legalmente constituida aun cuando no se hubiere cumplido con el requisito de la convocatoria. ==== ARTÍCULO TRIGÉSIMO. El Consejo de Administración, en adición a las que la Ley le confiere, tendrá las siguientes facultades y obligaciones, en el entendido de que en la medida que dichas facultades y obligaciones se refieran o tengan relación con cualquiera de los Asuntos Relevantes definidos y listados en el Artículo Décimo-séptimo de estos Estatutos, el órgano competente para resolver dichos asuntos será la Asamblea General Ordinaria de Accionistas y no el Consejo de Administración. ==== (1) Poder general para pleitos y cobranzas con todas las facultades generales y especiales que requieran cláusula especial de acuerdo con la Ley, sin limitación alguna, de conformidad con lo establecido en el primer párrafo del artículo dos mil quinientos cuarenta y cuatro (2544) del Código Civil Federal y en sus correlativos de los Códigos Civiles de todos los Estados de la República. En consecuencia el Consejo de Administración queda facultado, en forma enunciativa mas no limitativa, para representar a la Sociedad ante toda clase de personas físicas, morales y ante toda clase de autoridades de cualquier fuero, sean Judiciales, Civiles, Penales, Administrativas o del Trabajo, tanto del orden federal como local, en toda la extensión de la República Mexicana, en juicio o fuera de él, Instituto Mexicano del Seguro Social, INFONAVIT, promover toda clase de juicios de carácter Civil, Penal o Laboral, inclusive el juicio de Amparo, seguirlos en todos sus trámites y desistirse de ellos, interponer recursos contra autos interlocutorios y definitivos, consentir los favorables y pedir revocación por contrario imperio, contestar las demandas que se interpongan en contra de la Sociedad, formular, presentar querellas, denuncias o acusaciones y coadyuvar con el Ministerio Público en procesos penales, pudiendo constituir a la Sociedad como parte civil en dichos procesos y otorgar perdones cuando a su juicio el caso lo amerite, reconocer firmas, documentos y redargüir de falsos los que se presenten por la contraria, presentar testigos, ver presentar a los de contraria, interrogarlos, articular y absolver posiciones, transigir y comprometer en árbitros y recusar Magistrados, Jueces y demás funcionarios judiciales o administrativos, sin causa, con causa o bajo protesta de Ley, nombrar peritos. ==== (2) En los juicios de procedimiento laboral se tendrá REPRESENTACIÓN LEGAL a que se refieren los artículos once, 692 seiscientos noventa y dos fracciones II y III, 694 seiscientos noventa y cuatro, 695 seiscientos noventa y cinco, 786 setecientos ochenta y seis, 876 ochocientos setenta y seis, fracciones I y VI, 899 ochocientos noventa y nueve, en relación con lo aplicable con las normas de los capítulos XII y XVII del Título Catorce, todos de la Ley Federal del Trabajo en vigor, con las atribuciones, obligaciones y derechos que en materia de personalidad se refieren dichos dispositivos legales. En consecuencia la persona que designe el Consejo de Administración en representación de la Sociedad podrá comparecer a juicio ahora con todas las atribuciones y facultades que se mencionan en los incisos a), b), c), d), e) y f) de este artículo en lo aplicable, y además podrá en nombre de la Sociedad absolver posiciones, transigir, convenir con la contraparte obligándose la Sociedad a lo convenido, podrá concurrir en representación de la Empresa a la Audiencia de Conciliación, Demanda y Excepciones y Ofrecimiento y Admisión de Pruebas, con las atribuciones más amplias, ratificando la Sociedad todo lo que el Delegado haga en la Audiencia. ==== (3) Poder general para actos de administración de acuerdo con lo estipulado en el párrafo segundo del artículo dos mil quinientos cuarenta y cuatro del Código Civil Federal y artículos correlativos de los Códigos Civiles de todos los Estados de la República. ==== (4) Poder para designar y remover libremente a cualesquiera gerentes generales o especiales de la Sociedad, distintos al nombramiento del Director General de la Sociedad, así como a los demás funcionarios, apoderados, agentes y empleados de la Sociedad, determinar sus facultades, obligaciones, condiciones de trabajo y remuneraciones. ==== (5) Poder general para actos de dominio en los términos del tercer párrafo del artículo dos mil quinientos cincuenta y cuatro del Código Civil Federal y de sus artículos correlativos de los Códigos Civiles de todos los Estados de la República. ==== (6) Emitir, girar, suscribir, avalar y de cualquier otra forma negociar toda clase de títulos de crédito en los términos del artículo noveno de la Ley General de Títulos y Operaciones de Crédito. ==== (7) Para abrir y cancelar cuentas bancarias o con cualquier otro intermediario financiero, así como para hacer depósitos y girar contra ellas. ==== 7) Para convocar a Asambleas, en los casos previstos por estos Estatutos, así como para fijar la fecha y hora en que tales Asambleas deban celebrarse, determinar los asuntos que hayan de tratarse en la misma, y hacer que se incluyan los puntos que consideren pertinentes en los Ordenes del Día de las Asambleas que no fueren convocadas por su iniciativa, y para ejecutar las resoluciones que emitan las Asambleas. ==== 9) Para formular reglamentos interiores de trabajo. ==== 10) Para establecer sucursales y agencias de la Sociedad en cualquier parte de la República Mexicana o del extranjero. ==== 11) Para decidir sobre el sentido en que deban ser emitidos los votos correspondientes a las acciones propiedad de la Sociedad, en las Asambleas en que la Sociedad sea titular de acciones. ==== 12) Para conferir y revocar poderes generales o especiales con o sin facultades de sustitución y revocar unos y otros. ==== 13) Presentar a la Asamblea de Accionistas anualmente un informe Financiero que incluya cuando menos los puntos señalados en el Artículo 172 ciento setenta y dos de la Ley General de Sociedades Mercantiles. Este informe y el de los Comisarios deberá quedar terminado y ponerse a disposición de los accionistas cuando menos 15 (quince) días antes de la fecha de la Asamblea que haya de discutirlo. ==== (14) Programar el pago de dividendos decretados por Asambleas de Accionistas de acuerdo con las instrucciones de la Asamblea que corresponda. ==== (15) Las demás facultades y atribuciones que les señalen estos Estatutos Sociales o la Ley General de Sociedades Mercantiles. ==========================

================================== G E N E R A L E S ==================================

==== El señor **El Licenciado ROGELIO SEGOVIA GONZALEZ**, mexicano, mayor de edad, casado, originario de Cuernavaca, Morelos, habiendo nacido el día 26 veintiséis del mes de Abril del año 1977 mil novecientos setenta y siete, con Clave Única de Población SEGR770426HMSGNG02, Profesionista, al corriente en el pago del Impuesto Sobre la Renta, sin justificarlo de momento, con Registro Federal de Contribuyentes SEGR-770426-UC1, y el de su representada CMH-031020-U73, con domicilio en la Carretera Nacional número 6501 seis mil quinientos uno, Colonia La Estanzuela, en el Municipio de Monterrey, Nuevo León. ==========================

=== **YO, EL NOTARIO DOY FE**:- I.- De la verdad de este acto.- II.- De que conozco personalmente al compareciente a quien considero con la capacidad civil necesaria para celebrar el acto jurídico de que se trata, sin que me conste nada en contrario.- III.- De haber tenido a la vista los documentos de que se tomó razón.- IV.- De que lo relacionado e inserto concuerda con sus originales a los cuales me remito.- V.- De que le leí íntegramente esta escritura al compareciente, después de haberle saber el derecho que tiene de leerla por sí mismo, cerciorándome de su voluntad y explicándole el alcance y fuerza legal de su contenido.- VI.- De que cumplí con los demás requisitos que señala el artículo 106 ciento seis de la Ley del Notariado vigente, el compareciente manifestó su conformidad con el contenido de la misma, la cual ratifica en todas y cada una de sus partes y firma al calce de su puño y letra ante mí hoy día de su otorgamiento. **A U T O R I Z O** definitivamente la presente escritura en la misma fecha de su firma, en virtud de no causar impuesto alguno. **DOY FE**.- ==

==== **El Licenciado ROGELIO SEGOVIA GONZALEZ** Delegado Especial de la Asamblea General Extraordinaria de Accionistas de la Sociedad **CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V.** ==== RUBRICA ==== **ANTE MI ==== LICENCIADO RAFAEL SALVADOR GARZA ZAMBRANO NOTARIO PUBLICO TITULAR NOTARIA PUBLICA 137** ==== RUBRICA Y SELLO NOTARIAL ===============================

================================== DEL APENDICE ==================================

==== A la presente protocolización de Asamblea General Extraordinaria de Accionistas, el compareciente el **LICENCIADO ROGELIO SEGOVIA GONZALEZ** me exhibió copias de las Cédulas de Identificación Fiscal de los Accionistas que asistieron a la Asamblea cuya acta por este instrumento se protocoliza, de las cuales se desprende que dichos Accionistas tienen los siguientes Registros Federales de Contribuyentes: **CHRISTUS MUGUERZA, S.A.P.I. DE C.V.**, con Registro Federal de Causantes **CMU-980429-GH0**; y **CORPORACION MUGUERZA, S.A.P.I. DE C.V.** con Registro Federal de Causantes **R.F.C. CMU-990731-AR8**. ==============

============================== ANEXO "A" ==============================

==CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V.==

====BALANCE GENERAL AL 30 NOVIEMBRE DEL 2009====

Activo		Pasivo y capital contable	
Activo circulante		Pasivo a corto plazo	
		Pasivo a corto plazo y porción circulante de la deuda a largo plazo	
Efectivo y equivalentes	$ 1,232		$ 0
Cuentas por cobrar		Intercompañías	32,347

Clientes (neto de estimación para cuentas de cobro dudoso por $784 en 2008)	10 018	Proveedores	[illegible]
		Christus Health	
Intercompañías		ISR, PTU y otras contribuciones por pagar	
Otras cuentas por cobrar	329	Acreedores diversos y otras cuentas por pagar	1 148
Inventarios	5 108	Total del pasivo a corto plazo	[illegible]
Pagos anticipados	5 192		
Total del activo circulante	30 879	Pasivo a largo plazo	
		Intercompañías LP	[illegible]
Inmuebles, mobiliario y equipo, neto	13 257	Total del pasivo a largo plazo	[illegible]
Otros Activos	9 778	Total del pasivo	55 972
Participación de los trabajadores en la utilidad diferida			
Total del activo no circulante	23 760	Capital contable	
		Capital social suscrito	[illegible]
Total del activo	$ 54 303	Capital social no exhibido	[illegible]
		Capital social exhibido	67 324
		Utilidades acumuladas	[illegible]
		Total de capital contable mayoritario	[illegible]
		Total del pasivo y capital contable	$ 54 [illegible]

ANEXO "B"

CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V.

BALANCE GENERAL AL 30 NOVIEMBRE DEL 2009

Activo		Pasivo a largo plazo	
Activo circulante		Préstamos bancarios a largo plazo	[illegible]
Efectivo y equivalentes	$ 2 832	Intercompañías LP	[illegible]
Cuentas por cobrar		Arrendamiento Financiero	[illegible]
Clientes (neto de estimación para cuentas de cobro dudoso por $2 657 en 2009)	29 994	Christus Health	
		Impuestos diferidos a la utilidad	[illegible]
Intercompañías		Pensiones, prima de antigüedad y beneficios por terminación de empleados (Nota 9)	[illegible]
Otras cuentas por cobrar	261		
Inventarios	4 789	Total del pasivo a largo plazo	[illegible]
Pagos anticipados	16 509	Total del pasivo	[illegible]
Total del activo circulante	54 485		
		Contingencias y compromisos	
Inmuebles, mobiliario y equipo, neto	49 751		
Crédito mercantil	0	Capital contable	
Activo intangible por obligaciones laborales		Capital social suscrito	[illegible]
Otros Activos	349	Capital social no exhibido	[illegible]
Participación de los trabajadores en la utilidad diferida		Capital social exhibido	[illegible]
Total del activo no circulante	50 100	Prima en emisión de acciones	[illegible]
		Prima en	[illegible]

		Utilidades acumuladas	36,500
Pasivo y capital contable		Exceso en la actualización del capital contable	
Pasivo a corto plazo		Obligaciones laborales	
Pasivo a corto plazo y porción circulante de la deuda a largo plazo	$ 0	Efecto acumulado de impuesto sobre la renta diferido	
Intercompañías	32,045	Total de capital contable mayoritario	47,951
Proveedores	9,287	Interés minoritario	2
Otros pasivos		Total del capital contable	47,951
ISR, PTU y otras contribuciones por pagar			
Acreedores diversos y otras cuentas por pagar	3,699	Total de pasivo y capital contable	$ 104,566
Total de pasivo a corto plazo	45,031		

======================== ANEXO "C" ========================

======================== CLÍNICA REGIONAL ALLENDE, S.A. DE C.V. ========================

======================== BALANCE GENERAL AL 30 NOVIEMBRE DEL 2009 ========================

Activo		Pasivo y capital contable	
Activo circulante		Pasivo a corto plazo	
Efectivo y equivalentes	$ 44	Pasivo a corto plazo y porción circulante de la deuda a largo plazo	$ 0
Cuentas por cobrar		Intercompañías	1,053
Clientes (neto de estimación para cuentas de cobro		Proveedores	79
dudoso por $ en 2009)	0	ISR, PTU y otras contribuciones por pagar	255
Intercompañías	[illegible]	Acreedores diversos y otras cuentas por pagar	92
Otras cuentas por cobrar	932	Total del pasivo a corto plazo	1,788
Inventarios	98		
Pagos anticipados		Pasivo a largo plazo	
Total de activo circulante	1,091	Total del pasivo	1,788
Inmuebles, mobiliario y equipo neto	1,454	Capital contable	
Otros Activos	46	Capital social suscrito	1,114
Total de activo no circulante	1,500	Capital social no exhibido	0
		Capital social exhibido	1,114
Total de activo	$ 2,591	Prima en emisión de acciones	0
		Prima en emisión de acciones no exhibida	0
		Prima en emisión de acciones exhibida	0
		Utilidades acumuladas	-311
		Total de capital contable mayoritario	803
		Interés minoritario	0
		Total del capital contable	803
		Total del pasivo y capital contable	$ 2,591

======================================= ANEXO "D" ==

============================= CONVENIO DE FUSIÓN ===

==== Convenio de Fusión que celebran por una parte la sociedad **CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V.** representada en este acto por el Lic. Arturo Gerardo Garza Bueron y por la otra parte las sociedades **CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V.** y **CLINICA REGIONAL ALLENDE, S.A. DE C.V.** representadas en este acto por el Dr. Constantino Federico Padilla González y C.P. Adolfo Javier González González respectivamente, a quienes en lo sucesivo y para los efectos del presente convenio se les denominará la **FUSIONANTE** y las **FUSIONADAS**, respectivamente, el cual sujetan al tenor de las siguientes ==================

=== **D E C L A R A C I O N E S :** =================================

==== Manifiestan los comparecientes. ==

==== a) Que sus representadas el día 08 de diciembre del 2009 celebraron Asambleas Generales Extraordinarias de Accionistas en las que se acordó entre otras cosas fusionar en CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. a CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V. y CLINICA REGIONAL ALLENDE, S.A. DE C.V. ==

==== b) Cuentan con las facultades suficientes y necesarias para suscribir el presente Convenio de Fusión y formalizarlo como corresponde. ==

==== Declaran las partes que por así convenir a sus intereses y desarrollo comercial, desean fusionarse con sujeción a los términos, bases y condiciones que más adelante se consignan en este convenio (en lo sucesivo en adelante el "Convenio de Fusión"). ===

== **C L Á U S U L A S :** ==================================

==== **PRIMERA.-** Para todos los efectos legales a que haya lugar, la sociedad CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. se fusiona por incorporación con las sociedades CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V. y CLINICA REGIONAL ALLENDE, S.A. DE C.V., subsistiendo la primera al asumir el carácter de Fusionante y las segundas se extinguen y asumen el carácter de Fusionadas ==========

==== **SEGUNDA.-** Las cifras que servirán de base para realizar la fusión son las que arrojan los balances generales de la Fusionante y las Fusionadas, los cuales contienen cifras al día 30 de noviembre del 2009; asimismo se aprueba que el balance general pro forma de la Fusionante al 08 de diciembre del 2009 es el que refleja la situación financiera aproximada de la Fusionante después de la consolidación de los patrimonios en virtud de la fusión. ==

==== **TERCERA.-** De conformidad a lo establecido en el Artículo 225 de la Ley General de Sociedades Mercantiles, se hace constar que todos los acreedores han otorgado su consentimiento para efectos de la fusión y, en todo caso, para el supuesto de existir algún otro acreedor no identificado a la fecha, se acuerda el pago de sus deudas, por lo que la fusión surtirá efectos en la fecha en que las resoluciones adoptadas en las Asambleas Generales Extraordinarias de los Accionistas de la Fusionante y Fusionadas se formalicen ante Notario Público y se inscriban en el Registro Público de la Propiedad y del Comercio de los domicilios sociales de las sociedades fusionadas. ===

====**CUARTA.-** En virtud de la fusión, la Fusionante asumirá sin reserva ni limitación alguna, todos los activos, derechos, pasivos, obligaciones y responsabilidades de cualquier naturaleza y, en general, todo el patrimonio que les corresponda y pertenece a las Fusionadas, pasando a título universal al patrimonio de la Fusionante. En virtud de lo anterior, la Fusionante asumirá la propiedad y dominio directo sobre todos los activos y derechos de las Fusionadas y será responsable por todos los pasivos, obligaciones y responsabilidades contraídos por las Fusionadas a través de distintos actos jurídicos tales como contratos, convenios, licencias, permisos, concesiones o derivados de cualquier otro acto u operación realizado por las Fusionadas, incluyendo los de carácter laboral, de seguridad social, carácter fiscal, mercantil o civil. Asimismo, los activos y pasivos de las Fusionadas quedarán inscritos y asentados en los libros de la Fusionante al mismo valor que fueron inscritos y asentados en los libros de las Fusionadas. ==

==== **QUINTA.-** De conformidad a lo establecido en el Artículo 223 de la Ley General de Sociedades Mercantiles, deberán inscribirse en el Registro Público de la Propiedad y del Comercio y publicarse en el Periódico Oficial de los domicilios sociales de la Fusionante y Fusionadas las resoluciones adoptadas por las Asambleas Generales Extraordinarias de los Accionistas de la Fusionante y Fusionadas, así como sus respectivos balances generales con cifras al día 30 de noviembre del 2009. ==

==== **SEXTA.-** Como consecuencia de la fusión, los funcionarios, apoderados y/o representantes de cada una de las Fusionadas deberán cesar sus funciones y actividades, revocándose para todos los efectos todos y cada uno de

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SAN PEDRO GARZA GARCÍA

los poderes otorgados por las sociedades Fusionadas, una vez que surta efectos la fusión entre la Fusionante y las Fusionadas ==

==== SÉPTIMA.- En virtud de la fusión, la Fusionante deberá aumentar el capital social en su parte variable en la cantidad de $11'000,000.00 (Once millones de pesos 00/100 M.N.) mediante la emisión de 11'000,000 (once millones) de acciones ordinarias, nominativas, Serie "B-1", con valor nominal de $1.00 (Un peso 00/100 Moneda Nacional) cada una de ellas, y entréguense a los accionistas canjeándose los anteriores títulos accionarios representativos del capital social de las Fusionadas, quedando la estructura y tenencia accionaria de la Fusionante como a continuación se muestra: ==

ACCIONISTA	ACCIONES FIJO SERIE A	VARIABLE SERIE "B"	SERIE B-1 FUSIÓN	VALOR NOMINAL	VALOR TOTAL
CHRISTUS MUGUERZA, S.A.P.I. DE C.V.	49,999	87,255,000	10,998,000	$1.00	$98'3[illegible].00
CORPORACIÓN MUGUERZA, S.A.P.I. DE C.V.	1			$1.00	$1.00
SERVICIOS ADMINISTRATIVOS CM MÉXICO, S.A. DE C.V.			2,000	$1.00	$2,000.00
TOTALES.	50,000	87,255,000	11'000,000		$98'315,000.00

==== OCTAVA.- La Fusionante deberá conservar los libros sociales y registros contables de las Fusionadas y deberá cumplir con los avisos y notificaciones que sean necesarios ante las autoridades correspondientes. ====

==== NOVENA.- La Fusionante y Fusionadas se someterán a la jurisdicción de los Tribunales Competentes de la Ciudad de Monterrey, Nuevo León, México, renunciando a cualquier otra jurisdicción que les pudiere corresponder con motivo de sus domicilios presentes o futuros, o por cualquier otra causa ========= =========

==== Enteradas las partes del alcance y fuerza legal del presente Convenio de Fusión, se obligan a protocolizarlo ante Notario Público, conjuntamente con las actas de Asambleas Generales Extraordinarias de Accionistas de sus respectivas representadas en las que se acordó la fusión, lo firman ante los testigos que suscriben al calce en la Ciudad de Monterrey, Nuevo León, a los 09 días del mes de diciembre del 2009 ======= ===========

==== FUSIONANTE ==== CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V. ==== REPRESENTADA POR LIC. ARTURO GERARDO GARZA BUERON ==== RUBRICA ==== FUSIONADA ==== CHRISTUS MUGUERZA CONCHITA, S.A. DE C.V. ==== REPRESENTADA POR DR. CONSTANTINO FEDERICO PADILLA GONZÁLEZ ==== RUBRICA ==== **FUSIONADA** ==== CLÍNICA REGIONAL ALLENDE, S.A. DE C.V. REPRESENTADA POR DR. ADOLFO JAVIER GONZÁLEZ GONZÁLEZ ==== RUBRICA ==== TESTIGO ==== ING. ALEJANDRO CANAVATI MARCOS ==== TESTIGO ==== LIC. ROGELIO SEGOVIA GONZÁLEZ ============================

==== **ES PRIMER TESTIMONIO.** Fue tomado de su original el cual obra en el Libro número de Escritura, Folio al número mencionado, protegidas por kinegramas que pueden no tener numeración seguida. Se expide para uso exclusivo de la sociedad **"CHRISTUS MUGUERZA HOSPITALES", S.A. DE C.V.** Va en 9 nueve fojas útiles, debidamente cotejadas, corregidas y selladas en la Ciudad de San Pedro Garza García, Estado de Nuevo León, a los 31 treinta y uno días del mes de Diciembre del año (2009) dos mil nueve.- **DOY FE.-** =====

LICENCIADO RAFAEL SALVADOR GARZA ZAMBRANO
NOTARIO PUBLICO TITULAR
NOTARIA PUBLICA 137

REGISTRO PÚBLICO DE LA PROPIEDAD Y DEL COMERCIO DE

Monterrey, N.L.

BOLETA DE INSCRIPCIÓN

LOS ACTOS DESCRITOS EN EL PRESENTE DOCUMENTO QUEDARON INSCRITOS EN EL FOLIO MERCANTIL ELECTRÓNICO NÚMERO 86694 - 1

Control interno	Fecha de Prelación			Hora de Prelación
1	31	DICIEMBRE	2009	12:00:57

Fedatario

LIC. RAFAEL SALVADOR GARZA ZAMBRANO

Nombre, Denominación o Razón Social

CHRISTUS MUGUERZA HOSPITALES, S.A. DE C.V.

Actos inscritos

Documento	Acto	Descripción	Fecha Registro	Número de Registro
1766	M2	Asamblea Extraordinaria 1	11-01-2010	1

Cadena ... firma electrónica: d8c8b7e0... 8934

Derechos de Inscripción

Importe $1[illegible]717.00

REGISTRADOR LIC. CARLOS REYNALDO AYALA CALVO

La boleta se genera ... Los caracteres ... firma electrónica que aparecen ... autorizado por la Secretaría de Economía ... Código de Comercio y 15 del Reglamento del Registro Público de Comercio.

La boleta de inscripción con folio mercantil número 66694-1 que aparece en el anverso de esta hoja expedida por el C. Registrador Público de Comercio LICENCIADO CARLOS REYNALDO AYALA CALVO, inscrita con fecha 11 de Enero del 2010, forma parte de la Escritura Pública número 1768 de fecha 31 de Diciembre de 2010, otorgada ante la fe del Suscrito Notario.- Lo anterior lo hago constar para los efectos a que haya lugar.- DOY FE.-

LIC. RAFAEL SALVADOR GARZA ZAMBRANO
NOTARIO PÚBLICO TITULAR
NOTARÍA PÚBLICA 137

FILED UNDER REV. PROC. 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I **General Information**

Important: *All filers must complete Part I and sign below. See instructions*

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **7-24 Asistencia Medica, S.A. de C V**	**Applicant's identifying number** (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

☐ Individual
☐ Partnership
☐ Estate
☐ Domestic corporation
☐ S corporation
☐ Personal service corporation (PSC)
☐ Cooperative (sec. 1381(a))
☑ Controlled foreign corporation (CFC) (sec 957)
☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
☐ Specified foreign corporation (SFC) (sec 898)
☐ 10/50 corporation (sec 904(d)(2)(E))
☐ Trust
☐ Passive foreign investment company (PFIC) (sec. 1297)
☐ Other foreign corporation
☐ Tax-exempt organization
☐ Homeowners Association (sec 528)
☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs Go to Part III after completing Part I)
☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ **June 30**

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ **July 1** , 20 **09** , and ending ▶ **December 31** , 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ **Yes** ☑ **No**

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting.
☐ Cash receipts and disbursements method ☑ Accrual method
☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income.
Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11
Signature and date

Jay S. Herron, Sr Vice Pres / Treasurer
Name and title (print or type)

Preparer (other than filer)

1-12-2011
Signature of individual preparing the application and date

Raymond Lee
Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596
Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev. Proc. 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45 (or its successor) or section 5.04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U.S. shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation.		
18a	Personal service corporations (PSCs). Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶________. Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: 7-24 Asistencia Medica, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided·

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name. 7-24 Asistencia Medica, S A de C V
- Country of organization· Mexico
- U S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests 55.94% indirect ownership
- U S. employer identification number 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address N/A
- Stock interests· N/A
- U S employer identification number. N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent)

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- U.S. employer identification number· 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation

4/8/11 Jay S. Herron, SR Vice Pres/ Treasurer

Signature & Date Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below. See instructions

Type or Print

Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant if different than the filer (see instructions) **CAM Christus Muguerza, S.A. de C V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

☐ Individual
☐ Partnership
☐ Estate
☐ Domestic corporation
☐ S corporation
☐ Personal service corporation (PSC)
☐ Cooperative (sec 1381(a))
☑ Controlled foreign corporation (CFC) (sec 957)
☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
☐ Specified foreign corporation (SFC) (sec 898)
☐ 10/50 corporation (sec 904(d)(2)(E))
☐ Trust
☐ Passive foreign investment company (PFIC) (sec 1297)
☐ Other foreign corporation
☐ Tax-exempt organization
☐ Homeowners Association (sec 528)
☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 and ending ▶ December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*	Preparer (other than filer)
[signature] 4/8/11 Signature and date	Raymond Lee 1-12-2011 Signature of individual preparing the application and date
Jay S. Herron, SR Vice Pres/Treasurer Name and title (print or type)	**Raymond Lee** Name of individual preparing the application
* If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions	Ernst & Young LLP 401 Congress Avenue, Suite 1800 Austin, Texas 78701 FEIN 34-6565596 Name of firm preparing the application

Christus Health
EIN. 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test. Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ______ First preceding year $ ______ Second preceding year $ ______ Third preceding year $ ______ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

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		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6.01(7) of Rev. Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶ If "Yes" attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶ If "Yes" to line 8b go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period. Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request.		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

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Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S. shareholder (as defined in section 951(b)) providing the name, address identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer Christus Health
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Attachment to Form 1128

Applicant: CAM Christus Muguerza, S A. de C V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3

The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
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Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: CAM Christus Muguerza, S.A. de C V
- Country of organization: Mexico
- U.S employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 55.94% indirect ownership
- U S. employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address. N/A
- Stock interests: N/A
- U S employer identification number N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent).

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11

Signature & Date

Jay S. Herron, Senior Vice Pres/ Treasurer

Printed name and Title

FILED UNDER REV PROC 2006 45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below See instructions

Type or Print	
Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street and room or suite no (If a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant if different than the filer (see instructions) **Christus Muguerza Conchita, S A de C.V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 , and ending ▶ December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11

Signature and date

Jay S Herron, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN· 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

	Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)	Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓
	Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A		
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		
	Section C—Individuals (Rev. Proc 2003-62, or its successor) (see instructions) N/A		
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		
	Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A		
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

	Section A—General Information	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ______ First preceding year $ ______ Second preceding year $ ______ Third preceding year $ ______ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN. 76-0590551

			Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss $ ____ $ ____ Capital loss $ ____ $ ____ Unused credits $ ____ $ ____			
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev. Proc. 2002-39, or its successor) ▶ $ ____			
8a	Is the applicant a U.S shareholder in a CFC? ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period			
b	Will each CFC concurrently change its tax year? ▶ If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder			
9a	Is the applicant a U.S shareholder in a PFIC as defined in section 1297? ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant			
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? ▶			
10a	Is the applicant a member of a partnership a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period. Indicate the percentage of gross income of the applicant represented by each amount			
b	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶			
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? ▶			
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request			
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? ▶			
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? ▶			
14	Enter amount of **user fee** attached to this application (see instructions) ▶ $			

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs). Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____) ☐ Letter ruling (date of letter ruling ____ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶ ________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation.		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address identifying number and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant· Christus Muguerza Conchita, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name. Christus Muguerza Conchita, S.A de C V.
- Country of organization: Mexico
- U S. employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- Stock interests. 55 93% indirect ownership
- U.S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U.S employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11 — Jay S. Herron, SR Vice Pres/ Treasurer

Signature & Date — Printed name and Title

FILED UNDER REV PROC 2006-45

Form 1128 — Application To Adopt, Change, or Retain a Tax Year

(Rev January 2008)
Department of the Treasury, Internal Revenue Service

▶ See separate instructions.

OMB No 1545-0134
Attachment Sequence No 148

Part I General Information

Important: All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Christus Muguerza del Parque, S.A. de C.V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends. ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 , and ending ▶ December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/18/11

Signature and date

Jay S. Herron, SR Vice Pres./Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN. 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev Proc 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income, Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income, All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN: 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any resulting from the change (see section 5 05(1) (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶ If "Yes" to line 8b go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes" will the corporation be going to a permitted S corporation tax year? . . . . ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc) address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election. ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ________ Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name, address, identifying number, and percentage of interest owned

Filer. Christus Health
EIN 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza del Parque, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name: Christus Muguerza del Parque, S.A. de C.V.
- Country of organization: Mexico
- U.S. employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name. Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests 28 53% indirect ownership
- U.S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U.S. employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent)

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S. employer identification number. 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation

4/8/11

Signature & Date

Jay S. Herron, SR Vice Pres/ Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128**
(Rev January 2008)
Department of the Treasury
Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No. 1545-0134

Attachment Sequence No **148**

Part I General Information

Important: All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number (**214**) **492-8559** / (**214**) **492-8541**
Name of applicant, if different than the filer (see instructions) **Christus Muguerza Hospitales S.A de C.V**	**Applicant's identifying number** (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number (**512**) **473-3413** / (**866**) **331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other _______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ▶ _______ (Partnerships and PSCs Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ _______

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 , and ending ▶ December 31 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ _______

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11

Signature and date

Jay S Herron, SR Vice Pres/ Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN: 34-6565596

Name of firm preparing the application

* If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN. 76-0590551

Part II Automatic Approval Request (see instructions)

- Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553.		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓
	Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A		
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		
	Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A		
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		
	Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A		
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III Ruling Request (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions) **(Rev. Proc. 2002-39, or its successor)** N/A

	Section A—General Information	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented.		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation.		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box. ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN: 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U S. shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation. ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation.		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza Hospitales S A. de C.V

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3

The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: Christus Muguerza Hospitales S.A de C.V
- Country of organization: Mexico
- U S employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- Stock interests. 55.94% indirect ownership
- U S. employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address. N/A
- Stock interests N/A
- U.S employer identification number N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- U.S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11

Signature & Date

Jay S. Herron, Sr Vice Pres/ Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important. All filers must complete Part I and sign below See instructions.

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P.O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Christus Muguerza Monterrey, S.A. de C.V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec. 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec. 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs: Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends. ▶ **June 30**

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ **July 1**, 20 **09**, and ending ▶ **December 31**, 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting.

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*	**Preparer (other than filer)**
4/8/11 Signature and date	10/29/10 Signature of individual preparing the application and date
Jay S. Herron SR Vice President/Treasurer Name and title (print or type)	**Raymond Lee** Name of individual preparing the application
	Ernst & Young LLP 401 Congress Avenue, Suite 1800 Austin, Texas 78701 FEIN 34-6565596 Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553.		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev. Proc. 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev Proc. 2006-45 (or its successor) or section 5 04(8) of Rev Proc. 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation.		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev. Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box. ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . $ ______ $ ______ Unused credits . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1). (2), (3) and 6 01(7) of Rev. Proc. 2002-39, or its successor) . . . . . . ▶ $ ______		
8a	Is the applicant a U.S. shareholder in a CFC? . . . . . ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . . ▶ If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S. shareholder.		
9a	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297? . . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant.		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period. Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office?. . . . . ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request.		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation. ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . ▶ If "No" to line 16b, attach an explanation.		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶ If "Yes," attach a statement providing **(a)** the name, address, identifiying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation.		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election. ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____________) ☐ Letter ruling (date of letter ruling ____________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____________) ☐ Letter ruling (date of letter ruling ____________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization. ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶.................... Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation.		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period.

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name, address, identifying number, and percentage of interest owned.

Applicant: Christus Muguerza Monterrey, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1 964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name: Christus Muguerza Monterrey, S.A de C.V.
- Country of organization: Mexico
- U S employer identification number. None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- Stock interests: 55.94% indirect ownership
- U S employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U S employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation·

4/8/11
Signature & Date

Jay S. Herron SR Vice President/Tre
Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important. All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number (**214**) **492-8559** / (**214**) **492-8541**
Name of applicant, if different than the filer (see instructions) **Christus Muguerza Saltillo SAPI**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number (**512**) **473-3413** / (**866**) **331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec. 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs, Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ______

b If changing a tax year indicate the date the present tax year ends ▶ **June 30**

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ **July 1** , 20 **09** , and ending ▶ **December 31** , 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

JAY S. HERON, SR V.P. PRES / TREASURER

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10 50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN 76-0590551

Part II Automatic Approval Request (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev Proc 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev. Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III Ruling Request (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) (Rev. Proc. 2002-39, or its successor) N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes" attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN. 76-0590551

		Yes	No
6	Corporations only enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . \$ ______ \$ ______ Capital loss . . . . . . \$ ______ \$ ______ Unused credits . . . . . . \$ ______ \$ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc. 2002-39, or its successor) . . . . ▶ \$ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC) tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ \$		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual partnership, corporation, etc), address, identifying number, tax year, percentage of ownership and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifiying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza Saltillo SAPI

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3

The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1 964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: Christus Muguerza Saltillo SAPI
- Country of organization: Mexico
- U.S employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- Stock interests: 50 05% indirect ownership
- U.S employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address N/A
- Stock interests N/A
- U.S. employer identification number N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent).

- Name. Christus Health (common parent)
- Address. 2707 North Loop West, Houston, TX 77008
- U S employer identification number. 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation.

4/8/11

Signature & Date

Jay S. Herron, SR Vice Pres/ Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128**

(Rev January 2008)

Department of the Treasury
Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No. **148**

Part I General Information

Important: All filers must complete Part I and sign below See instructions

Type or Print	
Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant if different than the filer (see instructions) **Christus Muguerza Sistemas Hospitalarios, S.A de C V**	**Applicant's identifying number** (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec. 528)
- ☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs: Go to Part III after completing Part I.)

☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ **June 30**

c If adopting or changing a tax year the first return or short period return will be filed for the tax year beginning ▶ **July 1**, 20 **09**, and ending ▶ **December 31**, 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting.

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*	Preparer (other than filer)
4/8/11 Signature and date	1-12-2011 Signature of individual preparing the application and date
Jay S. Herron, SR Vice Pres/Treasurer Name and title (print or type)	**Raymond Lee** Name of individual preparing the application
	Ernst & Young LLP 401 Congress Avenue, Suite 1800 Austin, Texas 78701 FEIN 34-6565596 Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev Proc. 2006-45 (or its successor) or section 5.04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ______ First preceding year $ ______ Second preceding year $ ______ Third preceding year $ ______ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

Christus Health
EIN. 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss $ ____ $ ____ Capital loss $ ____ $ ____ Unused credits $ ____ $ ____		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) ▶ $ ____		
8a	Is the applicant a U S shareholder in a CFC? ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? ▶		
	If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? ▶		
	If "Yes," attach a statement providing the name, address, identifying number type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶		
c	If 'Yes" to line 10b, has any Form 1128 been filed for such partnership? ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? ▶		
14	Enter amount of **user fee** attached to this application (see instructions) ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? ▶		
	If "No" to line 16b, attach an explanation.		
17	Is the corporation a member of an affiliated group filing a consolidated return? ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____) ☐ Letter ruling (date of letter ruling ____ (attach copy))		

Christus Health
EIN. 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC etc), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation.		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period.

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza Sistemas Hospitalarios, S A. de C V

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1 964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name. Christus Muguerza Sistemas Hospitalarios, S A de C.V.
- Country of organization. Mexico
- U S employer identification number. None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 55 94% indirect ownership
- U.S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address N/A
- Stock interests. N/A
- U.S. employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent)

- Name Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S. employer identification number 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11 | Jay S. Herron, SR Vice Pres/ Treasurer

Signature & Date | Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev. January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545 0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below See instructions

Type or Print	
Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant if different than the filer (see instructions) **Christus Muguerza SUR Hemodinamia S A de C V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs Go to Part III after completing Part I.)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1, 20 09, and ending ▶ December 31, 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

Jay Stuessen, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

Raymond Lee 1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5.04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

Christus Health
EIN. 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated / Expiring Net operating loss . . . . . $ ________ $ ________ Capital loss . . . . . . $ ________ $ ________ Unused credits . . . . . . $ ________ $ ________		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ________		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U.S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request.		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation. ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election. ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began. ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN. 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza SUR Hemodinamia S.A. de C.V

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name. Christus Muguerza SUR Hemodinamia S A de C V.
- Country of organization Mexico
- U.S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests 31 08% indirect ownership
- U S employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U S employer identification number. N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address. 2707 North Loop West. Houston, TX 77008
- U S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11 | Jay S. Herron, SR Vice Pres/ Treasurer

Signature & Date | Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0134

Attachment Sequence No 148

Part I General Information

Important *All filers must complete Part I and sign below See instructions*

Type or Print	
Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Christus Muguerza Tuxtla S.A. de C.V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs: Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1, 20 09 , and ending ▶ December 31, 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation. See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

Jay S. Herron, SRVice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN. 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN. 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev. Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

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		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ________ $ ________ Capital loss . . . . . . $ ________ $ ________ Unused credits . . . . . . $ ________ $ ________		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ________		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes " attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election. ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifiying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U.S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name, address, identifying number and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza Tuxtla S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name: Christus Muguerza Tuxtla S A. de C V
- Country of organization. Mexico
- U S employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 55 94% indirect ownership
- U.S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address. N/A
- Stock interests. N/A
- U.S employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation

4/8/11 — Jay S. Herron, SR Vice Pres/ Treasurer

Signature & Date — Printed name and Title

FILED UNDER REV. PROC. 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No 148

Part I General Information

Important All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) Christus Health	Filer's identifying number 76-0590551
Number, street, and room or suite no (if a P O box, see instructions) 2707 North Loop West	Service Center where income tax return will be filed Ogden, UT
City or town, state, and ZIP code Houston, TX 77008	Filer's area code and telephone number/Fax number (214) 492-8559 /(214) 492-8541
Name of applicant, if different than the filer (see instructions) Christus Muguerza, SAPI	Applicant's identifying number (see instructions) Not applicable
Name of person to contact (if not the applicant or filer, attach a power of attorney) Joyce Hellums	Contact person's area code and telephone number/Fax number (512) 473-3413 /(866) 331-9763

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

☐ Individual
☐ Partnership
☐ Estate
☐ Domestic corporation
☐ S corporation
☐ Personal service corporation (PSC)
☐ Cooperative (sec 1381(a))
☑ Controlled foreign corporation (CFC) (sec. 957)
☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
☐ Specified foreign corporation (SFC) (sec. 898)
☐ 10/50 corporation (sec 904(d)(2)(E))
☐ Trust
☐ Passive foreign investment company (PFIC) (sec 1297)
☐ Other foreign corporation
☐ Tax-exempt organization
☐ Homeowners Association (sec. 528)
☐ Other ____________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ____________ (Partnerships and PSCs: Go to Part III after completing Part I)
☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ____________

b If changing a tax year, indicate the date the present tax year ends. ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 , and ending ▶ December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation. See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method
☐ Other method (specify) ▶ ____________

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

Jay S. Herlihy SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

10/29/10

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN. 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553.		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev. Proc. 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev. Proc. 2006-45 (or its successor) or section 5.04(8) of Rev. Proc. 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented.		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation.		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box. ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test. Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period. Short period $ ______ First preceding year $ ______ Second preceding year $ ______ Third preceding year $ ______ **Note:** *Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . $ ______ $ ______ Unused credits . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6 01(7) of Rev. Proc. 2002-39, or its successor) . . . ▶ $ ______		
8a	Is the applicant a U.S. shareholder in a CFC? . . . ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . ▶ If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S. shareholder.		
9a	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297? . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation. ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation.		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election. ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year.		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began. ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U.S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization. ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶.................... Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation.		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created. ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period.

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S shareholder's name, address, identifying number, and percentage of interest owned.

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Christus Muguerza, SAPI

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1 964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name· Christus Muguerza, SAPI
- Country of organization. Mexico
- U.S. employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 55.94% indirect ownership
- U.S. employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address: N/A
- Stock interests· N/A
- U.S. employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent)

- Name Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11

Signature & Date

Jay S. Herron Sr Vice Pres/Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state and ZIP code **Houston, TX 77008**	Filer's area code and telephone number Fax number (214) 492-8559 / (214) 492-8541
Name of applicant if different than the filer (see instructions) **Clinica Regional Allende S A de C V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number (512) 473-3413 / (866) 331-9763

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ (Partnerships and PSCs Go to Part III after completing Part I.)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1, 20 09, and ending ▶ December 31, 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11

Signature and date

Jay S. Herron SVP/Trea.

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box. ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev. Proc 2002 39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address identifying number, tax year and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III Section A line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned.

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Clinica Regional Allende, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: Clinica Regional Allende, S A de C.V.
- Country of organization: Mexico
- U S employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 55.94% indirect ownership
- U.S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U.S. employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U S employer identification number 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11 Jay S. Herron SVP/Trea

Signature & Date Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

► See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below See instructions

Type or Print	
Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Endoscopia Christus Muguerza de Saltillo, S.A. de C.V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ► ______ (Partnerships and PSCs Go to Part III after completing Part I)

☑ Change to a tax year ending ► **December 31** ☐ Retain a tax year ending ► ______

b If changing a tax year, indicate the date the present tax year ends ► **June 30**

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ► **July 1**, 20 **09** and ending ► **December 31** 20 **09**

3 Is the applicant's present tax year as stated on line 2b above also its current financial reporting year? ► ☐ Yes ☑ No

If "No," attach an explanation. See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ► ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

JAY S. Herron, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

For Privacy Act and Paperwork Reduction Act Notice, see separate instructions Cat No 21115C Form **1128** (Rev. 1 2008)

Christus Health
EIN 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev. Proc. 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev. Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box. ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
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		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss $ ______ $ ______ Capital loss $ ______ $ ______ Unused credits $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) ▶ $ ______		
8a	Is the applicant a U S. shareholder in a CFC? ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? ▶ If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC or a shareholder of an FSC? ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶		
c	If 'Yes" to line 10b, has any Form 1128 been filed for such partnership? ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? ▶		
14	Enter amount of **user fee** attached to this application (see instructions) ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? ▶ If 'No" to line 16b, attach an explanation.		
17	Is the corporation a member of an affiliated group filing a consolidated return? ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

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Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________(attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization. ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt. ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name, address, identifying number, and percentage of interest owned

Filer. Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Endoscopia Christus Muguerza de Saltillo, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name Endoscopia Christus Muguerza de Saltillo, S A de C.V
- Country of organization Mexico
- U.S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name. Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests: 48.53% indirect ownership
- U S employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address: N/A
- Stock interests N/A
- U S employer identification number. N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address. 2707 North Loop West, Houston, TX 77008
- U S employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11

Signature & Date

Jay S. Herron, Sr Vice-Pres/Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev. January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0131

Attachment Sequence No **148**

Part I General Information

Important. *All filers must complete Part I and sign below See instructions*

Type or Print	
Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Hospital Muguerza en su Hogar S A de C V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (If not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec. 528)
- ☐ Other ____________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs: Go to Part II after completing Part I)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1, 20 09, and ending ▶ December 31, 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ **Yes** ☑ **No**

If "No," attach an explanation. See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

JAY S. Herron, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

* If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

- Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓
	Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A		
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months. (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev. Proc 2002-39 (or its successor)? (see instructions) ▶		
	Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A		
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		
	Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A		
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity. See instructions) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change attach a copy of the letter ruling, or if not available an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev. Proc. 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions.*		

Christus Health
EIN. 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period:		
	Generated / Expiring		
	Net operating loss . . . . $ ________ $ ________		
	Capital loss . . . . . . $ ________ $ ________		
	Unused credits . . . . . . $ ________ $ ________		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6.01(7) of Rev. Proc. 2002-39, or its successor) . . . . ▶ $ ________		
8a	Is the applicant a U.S. shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U.S. shareholder		
9a	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period. Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved in each request.		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation. ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period; and **(d)** the name of the parent corporation.		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year		
	☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________)		
	☐ Letter ruling (date of letter ruling ________ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? . . . . ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? . . . . ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? . . . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? . ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned.

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Hospital Muguerza en su Hogar S.A de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided·

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name: Hospital Muguerza en su Hogar S.A de C.V.
- Country of organization· Mexico
- U.S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name. Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests· 55 94% indirect ownership
- U S. employer identification number· 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name No other domestic shareholders exist
- Address· N/A
- Stock interests: N/A
- U.S. employer identification number· N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name Christus Health (common parent)
- Address· 2707 North Loop West, Houston, TX 77008
- U S. employer identification number· 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation·

4/8/11 | Jay S. Herron, SR Vice Pres/Treasurer

Signature & Date | Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128**
(Rev January 2008)
Department of the Treasury
Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No 148

Part I General Information

Important: All filers must complete Part I and sign below See instructions

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number (214) 492-8559 / (214) 492-8541
Name of applicant if different than the filer (see instructions) **Litotripsia Christus Muguerza de Saltillo, S A de C V.**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number (512) 473-3413 / (866) 331-9763

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

☐ Individual
☐ Partnership
☐ Estate
☐ Domestic corporation
☐ S corporation
☐ Personal service corporation (PSC)
☐ Cooperative (sec 1381(a))
☑ Controlled foreign corporation (CFC) (sec 957)
☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
☐ Specified foreign corporation (SFC) (sec 898)
☐ 10/50 corporation (sec 904(d)(2)(E))
☐ Trust
☐ Passive foreign investment company (PFIC) (sec 1297)
☐ Other foreign corporation
☐ Tax-exempt organization
☐ Homeowners Association (sec 528)
☐ Other ________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs Go to Part III after completing Part I)
☑ Change to a tax year ending ▶ December 31
☐ Retain a tax year ending ▶ ________

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1, 20 09, and ending ▶ December 31, 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method
☐ Other method (specify) ▶ ________

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

Jay S. Herron, SR Vice Pres | Treasurer

Name and title (print or type)

Preparer (other than filer)

Raymond Lee 1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN. 76-0590551

Part II Automatic Approval Request (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6.09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III Ruling Request (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions) (Rev. Proc. 2002-39, or its successor) N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period. (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN: 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5.05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶ If "Yes," attach a statement for each CFC providing the name, address identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶ If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved in each request.		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . . . ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs): Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization. ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶ ______ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN. 76-0590551

Attachment to Form 1128

Applicant: Litotripsia Christus Muguerza de Saltillo, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1 964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: Litotripsia Christus Muguerza de Saltillo, S A. de C.V
- Country of organization: Mexico
- U S employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name. Christus Health (common parent)
- Address. 2707 North Loop West, Houston, TX 77008
- Stock interests. 28.53% indirect ownership
- U S employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name No other domestic shareholders exist
- Address N/A
- Stock interests: N/A
- U.S employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent).

- Name. Christus Health (common parent)
- Address. 2707 North Loop West, Houston, TX 77008
- U S. employer identification number. 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation.

4/8/11 — Signature & Date

Jay S. Herron, Sr Vice Pres/Treasurer — Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

► See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important. *All filers must complete Part I and sign below See instructions*

Type or Print	
Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Oncologia Muguerza, S.A. de C V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec. 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ____________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ► ________ (Partnerships and PSCs: Go to Part III after completing Part I.)

☑ Change to a tax year ending ► December 31 ☐ Retain a tax year ending ► ________

b If changing a tax year, indicate the date the present tax year ends. ► June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ► July 1 , 20 09 , and ending ► December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ► ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ► ________

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See Who Must Sign in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11

Signature and date

JAY S. Herron, Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

Raymond Lee 1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN: 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN: 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated / Expiring Net operating loss . . . . $ ______ $ ______ Capital loss . . . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1) (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________(attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period.		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation S corporation, IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period.		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶ ________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation.		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate.

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S. shareholder's name, address, identifying number, and percentage of interest owned.

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Oncologia Muguerza, S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year This entity currently reports its financial information for book purposes on a calendar year basis For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name: Oncologia Muguerza, S A de C V
- Country of organization Mexico
- U S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name Christus Health (common parent)
- Address 2707 North Loop West, Houston, TX 77008
- Stock interests: 38 04% indirect ownership
- U S. employer identification number: 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name: No other domestic shareholders exist
- Address N/A
- Stock interests. N/A
- U S employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent)

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S employer identification number. 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation:

4/8/11
Signature & Date

JAy S. Hewon, SR Vice Pres/Treasurer
Printed name and Title

FILED UNDER REV. PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions

OMB No 1545-0134

Attachment Sequence No. **148**

Part I General Information

Important: *All filers must complete Part I and sign below See instructions*

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Rayos X Muguerza, S.A. de C.V.**	**Applicant's identifying number** (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

Type or Print

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec. 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions):

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs Go to Part III after completing Part I.)

☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends ▶ **June 30**

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ **July 1** , 20 **09** , and ending ▶ **December 31** , 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge.

Filer*

4/8/11

Signature and date

JAY S. Herron, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder, see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

- Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553.		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev. Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

		Yes	No
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

		Yes	No
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5.03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations enter ordinary income Section 501(c) organizations, enter unrelated business taxable income Estates, enter adjusted total income All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN: 76-0590551

		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period. Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . $ ______ $ ______ Unused credits . . . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6.01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period.		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b, go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount.		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method tax year, etc.) and the specific issues involved in each request		
12	Is **Form 2848**, Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶		
	If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs) Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began. ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation IC-DISC, etc), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization. ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T. 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Rayos X Muguerza, S.A de C.V

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
FEIN: 76-0590551

Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1 964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided.

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009

Information regarding the Foreign Corporation:

- Name· Rayos X Muguerza, S A de C V
- Country of organization: Mexico
- U S. employer identification number None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- Stock interests· 55 86% indirect ownership
- U.S. employer identification number 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name No other domestic shareholders exist
- Address: N/A
- Stock interests: N/A
- U.S. employer identification number: N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent).

- Name· Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U S. employer identification number: 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed.

Pursuant to Reg §1 964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation.

4/8/11

Signature & Date

JAY S. Herron, SR Vice Pres/Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I **General Information**

Important. *All filers must complete Part I and sign below See instructions*

Type or Print

Name of filer (if a joint return is filed, also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number, street, and room or suite no (if a P O box, see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Rehabilitacion CM SUR S.A. de C V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

1 Check the appropriate box(es) to indicate the type of applicant (see instructions)

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec. 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other _______________ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ________ (Partnerships and PSCs: Go to Part III after completing Part I)

☑ Change to a tax year ending ▶ **December 31** ☐ Retain a tax year ending ▶ ____________

b If changing a tax year, indicate the date the present tax year ends ▶ **June 30**

c If adopting or changing a tax year the first return or short period return will be filed for the tax year beginning ▶ **July 1** , 20 **09** , and ending ▶ **December 31** , 20 **09**

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ____________

5 State the nature of the applicant's business or principal source of income.

Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

JAY S. Herron, SR Vice Pres/Treasurer

Name and title (print or type)

Preparer (other than filer)

Raymond Lee 1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN. 34-6565596

Name of firm preparing the application

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Christus Health
EIN: 76-0590551

Part II **Automatic Approval Request** (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev. Proc 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓
	Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor) N/A		
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4 01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc 2006-45 (or its successor) or section 5 04(8) of Rev Proc 2002-39 (or its successor)? (see instructions) ▶		
	Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A		
9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		
	Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A		
10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III **Ruling Request** (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions.) **(Rev. Proc. 2002-39, or its successor)** N/A

	Section A—General Information	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation.		
4a	Is the applicant requesting to establish a business purpose under section 5 02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period. Short period $ ________ First preceding year $ ________ Second preceding year $ ________ Third preceding year $ ________ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants. enter taxable income before net operating loss deduction and special deductions.*		

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		Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period Generated / Expiring Net operating loss . . . . . $ ______ $ ______ Capital loss . . . . $ ______ $ ______ Unused credits . . . . $ ______ $ ______		
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor) . . . . ▶ $ ______		
8a	Is the applicant a U S shareholder in a CFC? . . . . ▶		
	If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period		
b	Will each CFC concurrently change its tax year? . . . . ▶		
	If "Yes" to line 8b go to Part II, line 3 If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder.		
9a	Is the applicant a U S shareholder in a PFIC as defined in section 1297? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant		
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? . . . . ▶		
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? . . . . ▶		
	If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount		
b	Will any partnership concurrently change its tax year to conform with the tax year requested? . . ▶		
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? . . . . ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office? . . . . ▶		
	If "Yes," attach a statement explaining the type of request (method, tax year, etc.) and the specific issues involved in each request		
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? . . ▶		
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? . . . . ▶		
14	Enter amount of **user fee** attached to this application (see instructions) . . . . ▶ $		

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

15 Enter the date of incorporation ▶

		Yes	No
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? . . . . ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? . . . . ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? . . . . ▶		
	If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return, **(b)** the name, address, and identifying number of each member of the affiliated group; **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs). Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc), address identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

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Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____________) ☐ Letter ruling (date of letter ruling ____________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year. ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ____________) ☐ Letter ruling (date of letter ruling ____________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28 Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization. ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization. ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶ ______ Attach a copy of the letter ruling granting exemption. If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Rehabilitacion CM SUR S.A. de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.

Christus Health
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Statement required to be filed with a tax return under Reg §1.964-1(c)(3)(ii)
and
Notification required under Reg §1.964-1(c)(3)(iii)

Pursuant to Reg §§1.964-1(c)(3)(ii) and 1.964-1(c)(3)(iii), the following information is provided:

Description of the nature of the action taken on behalf of the foreign corporation and the taxable year for which made:

- The foreign corporation elects to change its year end for United States income tax purposes from June 30 to December 31, effective for the period ending December 31, 2009.

Information regarding the Foreign Corporation:

- Name: Rehabilitacion CM SUR S.A de C.V
- Country of organization Mexico
- U.S employer identification number: None

Information regarding each controlling domestic shareholder (or, if applicable, the shareholder's common parent) approving the action:

- Name: Christus Health (common parent)
- Address. 2707 North Loop West, Houston, TX 77008
- Stock interests: 28.52% indirect ownership
- U S. employer identification number. 76-0590551

Information regarding all other domestic shareholders notified of the action taken:

- Name. No other domestic shareholders exist
- Address N/A
- Stock interests N/A
- U S. employer identification number N/A

Information regarding the designated shareholder who retains a jointly executed consent confirming that such action has been approved by all of the controlling domestic shareholders and containing the signature of a principal officer of each such shareholder (or its common parent):

- Name: Christus Health (common parent)
- Address: 2707 North Loop West, Houston, TX 77008
- U.S. employer identification number 76-0590551

Each controlling domestic shareholder (or its common parent) shall file the statement with, and on or before the due date (including extensions) of, its own tax return (or information return, if applicable) for its taxable year with or within which ends the taxable year of the foreign corporation for which the election is made or for which the method of accounting or taxable year is adopted or changed

Pursuant to Reg §1.964-1(c)(3)(iii) the controlling domestic shareholders shall provide written notice of the election made or the adoption or change of method or taxable year effected to all other persons known by them to be domestic shareholders who own (within the meaning of section 958(a)) stock of the foreign corporation.

Consent of Action: Consent to the above action is hereby provided in my capacity as sole controlling domestic shareholder of the above-referenced foreign corporation

4/8/11

Signature & Date

JAY S. Herron, SR Vice Pres/ Treasurer

Printed name and Title

FILED UNDER REV PROC 2006-45

Form **1128** (Rev January 2008) Department of the Treasury Internal Revenue Service

Application To Adopt, Change, or Retain a Tax Year

▶ See separate instructions.

OMB No 1545-0134

Attachment Sequence No **148**

Part I General Information

Important All filers must complete Part I and sign below See instructions

Name of filer (if a joint return is filed also enter spouse's name) (see instructions) **Christus Health**	Filer's identifying number **76-0590551**
Number street and room or suite no (if a P O box see instructions) **2707 North Loop West**	Service Center where income tax return will be filed **Ogden, UT**
City or town, state, and ZIP code **Houston, TX 77008**	Filer's area code and telephone number/Fax number **(214) 492-8559 / (214) 492-8541**
Name of applicant, if different than the filer (see instructions) **Servicios Administrativos CM de Mexico, S.A de C.V**	Applicant's identifying number (see instructions) **Not applicable**
Name of person to contact (if not the applicant or filer, attach a power of attorney) **Joyce Hellums**	Contact person's area code and telephone number/Fax number **(512) 473-3413 / (866) 331-9763**

Type or Print

1 Check the appropriate box(es) to indicate the type of applicant (see instructions).

- ☐ Individual
- ☐ Partnership
- ☐ Estate
- ☐ Domestic corporation
- ☐ S corporation
- ☐ Personal service corporation (PSC)
- ☐ Cooperative (sec 1381(a))
- ☑ Controlled foreign corporation (CFC) (sec 957)
- ☐ Foreign sales corporation (FSC) or Interest charge domestic international sales corporation (IC-DISC)
- ☐ Specified foreign corporation (SFC) (sec 898)
- ☐ 10/50 corporation (sec 904(d)(2)(E))
- ☐ Trust
- ☐ Passive foreign investment company (PFIC) (sec 1297)
- ☐ Other foreign corporation
- ☐ Tax-exempt organization
- ☐ Homeowners Association (sec 528)
- ☐ Other ______ (Specify entity and applicable Code section)

2a Approval is requested to (check one) (see instructions)

☐ Adopt a tax year ending ▶ ______ (Partnerships and PSCs: Go to Part III after completing Part I.)

☑ Change to a tax year ending ▶ December 31 ☐ Retain a tax year ending ▶ ______

b If changing a tax year, indicate the date the present tax year ends ▶ June 30

c If adopting or changing a tax year, the first return or short period return will be filed for the tax year beginning ▶ July 1 , 20 09 , and ending ▶ December 31 , 20 09

3 Is the applicant's present tax year, as stated on line 2b above, also its current financial reporting year? ▶ ☐ Yes ☑ No

If "No," attach an explanation See Statement 1

4 Indicate the applicant's present overall method of accounting

☐ Cash receipts and disbursements method ☑ Accrual method

☐ Other method (specify) ▶ ______

5 State the nature of the applicant's business or principal source of income

Health Care Services

Signature—All Filers (See **Who Must Sign** in the instructions.)

Under penalties of perjury, I declare that I have examined this application, 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 filer) is based on all information of which preparer has any knowledge

Filer*

4/8/11

Signature and date

Jay S. Herron, SR Vice Pres/Treasurer

Name and title (print or type)

*If the application is filed on behalf of a controlled foreign corporation or a 10/50 corporation by a controlling domestic shareholder see instructions

Preparer (other than filer)

Raymond Lee 1-12-2011

Signature of individual preparing the application and date

Raymond Lee

Name of individual preparing the application

Ernst & Young LLP
401 Congress Avenue, Suite 1800
Austin, Texas 78701
FEIN 34-6565596

Name of firm preparing the application

Christus Health
EIN· 76-0590551

Part II Automatic Approval Request (see instructions)

• Identify the revenue procedure under which this automatic approval request is filed ▶ 2006-45

Section A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, or its successor)

		Yes	No
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-45 (or its successor)? (see instructions) ▶	✓	
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553		✓
3	Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions) ▶		✓

Section B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc 2006-46, or its successor) N/A

		Yes	No
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year **and** is not precluded from using the automatic approval rules under section 4 of Rev Proc 2006-46 (or its successor)? (see instructions) ▶		
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year? ▶		
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted) ▶		
7	Is the S corporation requesting an ownership tax year? (see instructions) ▶		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev Proc. 2006-45 (or its successor) or section 5 04(8) of Rev. Proc 2002-39 (or its successor)? (see instructions) ▶		

Section C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions) N/A

9	Is the applicant an individual requesting a change from a fiscal year to a calendar year? ▶		

Section D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions) N/A

10	Is the applicant a tax-exempt organization requesting a change? ▶		

Part III Ruling Request (All applicants requesting a ruling must complete Section A and any other section that applies to the entity See instructions) **(Rev. Proc. 2002-39, or its successor)** N/A

Section A—General Information

		Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court? ▶ If "Yes," see the instructions for information that must be included on an attached explanation.		
2	Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year? ▶ If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted If a letter ruling was not issued, indicate when and explain how the change was implemented		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented? ▶ If "Yes," attach an explanation		
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev Proc 2002-39 (or its successor)? ▶ If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions).		
b	If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box ☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period If necessary, estimate the amount for the short period Short period $ _____ First preceding year $ _____ Second preceding year $ _____ Third preceding year $ _____ **Note:** *Individuals, enter adjusted gross income Partnerships and S corporations, enter ordinary income Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions*		

Christus Health
EIN: 76-0590551

			Yes	No
6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period: Generated / Expiring Net operating loss $ ______ $ ______ Capital loss $ ______ $ ______ Unused credits $ ______ $ ______			
7	Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6.01(7) of Rev Proc 2002-39, or its successor) ▶ $ ______			
8a	Is the applicant a U S shareholder in a CFC? ▶ If "Yes," attach a statement for each CFC providing the name, address, identifying number, tax year, the percentage of total combined voting power of the applicant, and the amount of income included in the gross income of the applicant under section 951 for the 3 tax years immediately before the short period and for the short period			
b	Will each CFC concurrently change its tax year? ▶ If "Yes" to line 8b, go to Part II, line 3. If "No," attach a statement explaining why the CFC will not be conforming to the tax year requested by the U S shareholder			
9a	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297? ▶ If "Yes," attach a statement providing the name, address, identifying number, and tax year of the PFIC, the percentage of interest owned by the applicant, and the amount of distributions or ordinary earnings and net capital gain from the PFIC included in the income of the applicant			
b	Did the applicant elect under section 1295 to treat the PFIC as a qualified electing fund? ▶			
10a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC? ▶ If "Yes," attach a statement providing the name, address, identifying number, type of entity (partnership, trust, estate, S corporation, IC-DISC, or FSC), tax year, percentage of interest in capital and profits, or percentage of interest of each IC-DISC or FSC and the amount of income received from each entity for the first preceding year and for the short period Indicate the percentage of gross income of the applicant represented by each amount			
b	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶			
c	If "Yes" to line 10b, has any Form 1128 been filed for such partnership? ▶			
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling or technical advice request pending with the IRS National Office? ▶ If "Yes," attach a statement explaining the type of request (method, tax year, etc) and the specific issues involved in each request			
12	Is **Form 2848,** Power of Attorney and Declaration of Representative, attached to this application? ▶			
13	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application? ▶			
14	Enter amount of **user fee** attached to this application (see instructions) ▶ $			

Section B—Corporations (other than S corporations and controlled foreign corporations) (see instructions) N/A

		Yes	No
15	Enter the date of incorporation ▶		
16a	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period? ▶		
b	If "Yes," will the corporation be going to a permitted S corporation tax year? ▶ If "No" to line 16b, attach an explanation		
17	Is the corporation a member of an affiliated group filing a consolidated return? ▶ If "Yes," attach a statement providing **(a)** the name, address, identifying number used on the consolidated return, tax year, and Service Center where the applicant files the return; **(b)** the name, address, and identifying number of each member of the affiliated group, **(c)** the taxable income (loss) of each member for the 3 years immediately before the short period and for the short period, and **(d)** the name of the parent corporation		
18a	Personal service corporations (PSCs). Attach a statement providing each shareholder's name, type of entity (individual partnership, corporation, etc), address, identifying number tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		
b	If the PSC is using a tax year other than the required tax year indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ______) ☐ Letter ruling (date of letter ruling ______ (attach copy))		

Christus Health
EIN: 76-0590551

Section C—S Corporations (see instructions) N/A

		Yes	No
19	Enter the date of the S corporation election ▶		
20	Is any shareholder applying for a corresponding change in tax year? ▶ If "Yes," each shareholder requesting a corresponding change in tax year must file a separate Form 1128 to get advance approval to change its tax year		
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		

Section D—Partnerships (see instructions) N/A

		Yes	No
23	Enter the date the partnership's business began ▶		
24	Is any partner applying for a corresponding change in tax year? ▶		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc) address, identifying number, tax year, and the percentage of interest in capital and profits.		
26	Is any partner a shareholder of a PSC as defined in Regulations section 1 441-3(c)? ▶ If "Yes," attach a statement providing the name, address, identifying number, tax year, percentage of interest in capital and profits, and the amount of income received from each PSC for the first preceding year and for the short period		
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year ☐ Grandfathered (attach copy of letter ruling) ☐ Section 444 election (date of election ________) ☐ Letter ruling (date of letter ruling ________ (attach copy))		

Section E—Controlled Foreign Corporations (CFC) N/A

28	Attach a statement for each U S shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.		

Section F—Tax-Exempt Organizations N/A

		Yes	No
29	Type of organization ☐ Corporation ☐ Trust ☐ Other (specify) ▶		
30	Date of organization ▶		
31	Code section under which the organization is exempt ▶		
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted ▶ ________ Attach a copy of the letter ruling granting exemption If a copy of the letter ruling is not available, attach an explanation		
34	If the organization is a private foundation, is the foundation terminating its status under section 507? ▶		

Section G—Estates N/A

35 Enter the date the estate was created ▶

36a Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each person who is an interested party of any portion of the estate

b Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement showing the distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately before the short period and for the short period

Section H—Passive Foreign Investment Companies N/A

37 If the applicant is a passive foreign investment company, attach a statement providing each U S shareholder's name, address, identifying number, and percentage of interest owned.

Filer: Christus Health
EIN: 76-0590551

Attachment to Form 1128

Applicant: Servicios Administrativos CM de Mexico, S A de C.V.

2707 North Loop West
Houston, TX 77008

Page 1, Part I, Line 3
The Applicant's present tax year is not its current financial reporting year. This entity currently reports its financial information for book purposes on a calendar year basis. For tax purposes, this entity currently utilizes a June 30 fiscal year end.