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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.)

[illegible]

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
GENERAL HEALTH MANAGEMENT, INC. 72-0901131 8490 PICARDY AVE; BATON ROUGE, LA 70809	MANAGING COMPANY	LOUISIANA	GENERAL HEALTH SYSTEM	C CORP	0	0	100%
HEALTH MANAGEMENT SERVICES, INC 72-0929442 8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	GENERAL HEALTH MGMT, INC	C CORP	0	0	100%
HEALTH INITIATIVES, INC. 72-0981798 8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	GENERAL HEALTH MGMT, INC	C CORP	0	0	100%
GENERAL HEALTH SYSTEM MGMT, INC 72-1335513 8490 PICARDY AVE; BATON ROUGE, LA 70809	MANAGING COMPANY	LOUISIANA	GENERAL HEALTH SYSTEM	C CORP	0	(1,314,667)	100%
VERITY HEALTHNET ACCTS MGT SVCS * 72-1245224 8490 PICARDY AVE; BATON ROUGE, LA 70809	MANAGING COMPANY	LOUISIANA	GENERAL HEALTH SYSTEM MGT	C CORP	402,036	568	100%
VERITY HEALTHNET, LLC 45-0510673 8490 PICARDY AVE; BATON ROUGE, LA 70809	MEDICAL PROVIDER NETWORK	LOUISIANA	VERANS *	C CORP	8,109	4,566	50%
VERITY HEALTHNET NATL, LLC 56-2353850 8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	VERANS *	C CORP	0	0	50%

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[illegible]

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
BRC PHYSICIANS AFTER HRS CLINIC 74-3109146							
8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	GENERAL HEALTH	C CORP	0	0	100%
MEDICAL DIAGNOSTIC SVCS INC 72-0994499							
8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	GENERAL HEALTH	C CORP	4	89,500	100%
BRC PHYSICIANS SVCS INC 20-3756691	PHYSICIAN						
8490 PICARDY AVE; BATON ROUGE, LA 70809	CLINIC	LOUISIANA	GENERAL HEALTH	C CORP	(1,736,724)	2,446,765	100%
BRC PHYSICIANS INC 72-1245632	PHYSICIAN						
8490 PICARDY AVE; BATON ROUGE, LA 70809	CLINIC	LOUISIANA	BRC PHYSICIANS	C CORP	(32)	2,593,489	100%
HOSPITAL MEDICINE GROUP INC 20-3720898	PHYSICIAN						
8490 PICARDY AVE; BATON ROUGE, LA 70809	CLINIC	LOUISIANA	BRC PHYSICIANS	C CORP	275	1,957,814	100%
BRCP HOSPITAL SPECIALISTS INC 20-3756738	PHYSICIAN						
8490 PICARDY AVE; BATON ROUGE, LA 70809	CLINIC	LOUISIANA	BRC PHYSICIANS	C CORP	(583)	401,890	100%
GHF SOUTH HEALTH PLANS INC 72-1068656							
8490 PICARDY AVE; BATON ROUGE, LA 70809	DORMANT CORP	LOUISIANA	GENERAL HEALTH	C CORP	1	43,236	100%

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Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to other organization(s)	X	
c Gift, grant, or capital contribution from other organization(s)	X	
d Loans or loan guarantees to or for other organization(s)	X	
e Loans or loan guarantees by other organization(s)	X	
f Sale of assets to other organization(s)		X
g Purchase of assets from other organization(s)		X
h Exchange of assets		X
i Lease of facilities, equipment, or other assets to other organization(s)		X
j Lease of facilities, equipment, or other assets from other organization(s)		X
k Performance of services or membership or fundraising solicitations for other organization(s)		X
l Performance of services or membership or fundraising solicitations by other organization(s)		X
m Sharing of facilities, equipment, mailing lists, or other assets		X
n Sharing of paid employees		X
o Reimbursement paid to other organization for expenses		X
p Reimbursement paid by other organization for expenses		X
q Other transfer of cash or property to other organization(s)		X
r Other transfer of cash or property from other organization(s)		X

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-f)	(c) Amount involved
(1) GENERAL HEALTH SYSTEM	n	21,756
(2) BATON ROUGE GENERAL MEDICAL CENTER	c	430,405
(3) BATON ROUGE GENERAL MEDICAL CENTER	b	1,384,082
(4)		
(5)		
(6)		

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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.

[illegible]

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