	3	200					2939	315	300	701 8
	(7)	2)					2700		Al A	
_ 0	990-T	Ex	rempt Organization	Bus	siness Ind	come 1	Гах Retu	rn 🎢	ОМВ	No 1545-0687
Form		5 1	(and proxy tax					1 7		
Department	it of the Treasury		idar year 2016 or other tax year begir formation about Form 990-T and		-				2	4W I D
	venue Service		not enter SSN numbers on this form						Open to 501(c)(3)	Public Inspection for Organizations Only
	Check box if address changed		Name of organization (Check b	ox if na	me changed and se	e instructions	;)		oyer identif	fication number see instructions)
	t under section		CUDICTUC UDALTU NOD	מים טיחי	ONI TOTITOTAN	170		(.,	,
	1(C)(B ₀)	Print	CHRISTUS HEALTH NOR Number, street, and room or suite no					72-0	408982	
408	THE !	or Type			,			E Unrel	ated busin	ess activity codes
408		Type	ONE ST MARY PLACE					(See in	structions)	
529	<u> </u>		City or town, state or province, country		ZIP or foreign posta	l code		7000	0.0	601.000
at end o	alue of all assets of year	F Gro	SHREVEPORT, LA 7110 up exemption number (See instruct				0928	7223	20	621990
175,	449,569.		ck organization type X 501			501(c)		401(a)	trust	Other trust
			rimary unrelated business activity						_	
			corporation a subsidiary in an affil			subsidiary co	ontrolled group?			X Yes No
			identifying number of the parent co	rporati	ion ► AT	TACHME			-1100 (12210221
			SCOTT MERRYMAN or Business Income		(A) Inco		e number ► 31		-/1/2 T	(C) Net
	oss receipts or s		56,596.		(A) Inco	arie .	(B) Expe	1568	 	(C) Net
	s returns and allowar		c Balance ▶	1c	56	5,596.				
2 Co	st of goods sold	d (Sched	ule A, line 7)	2						
			2 from line 1c	3	50	5,596.	·			56,596.
			ttach Schedule D)	4a						
			Part II, line 17) (attach Form 4797)	4b					+	
			rusts	4c 5					+	
			· · · · · · · · · · · · · · · · · · ·	6						
			come (Schedule E)	7						
8 Inter	erest, annuities, royalt	ies, and ren	its from controlled organizations (Schedule F)	8						
_			1(c)(7), (9) or (17) organization (Schedule G)						<u> </u>	
			ncome (Schedule I)	10					<u> </u>	
			tions, attach schedule)	11						
	_		ough 12		56	5,596.	·			56,596.
	Deduction	s Not	Taken Elsewhere (See inst	ructio	ons for limitat			Except f	or contr	
			be directly connected with t					т-		
			directors, and trustees (Schedule K)						-	10 200
									1	18,390.
47 Rad	d dobte						eceive	0		
18 Inte	erest (attach scl	hedule)						92		
19 Tax	xes and licenses					. [젊] .[AY 3.0 20		1	
20 011	iantable contribi	นแบกร (อ	see instructions for limitation rules)				GDEN, L	20		
21 De _l 22 Les	preciation (attai	claimed	4562)	· · ·			JODEIV, 6	22b	!	
										
			compensation plans							
25 Em	nployee benefit j	programs						25		
			Schedule I)						ļ	
			chedule J)						 	46,487.
			chedule)						 	64,877.
			le income before net operating							-8,281.
31 Net	t operating loss	deduction	on (limited to the amount on line 30	0)				31		
			e income before specific deduction						ļ	-8,281.
			ally \$1,000, but see line 33 instruc						 	1,000.
			ole income. Subtract line 33 fr			_				-8,281.
For Pape	erwork Reduction	on Act N	otice, see instructions.	· · ·	<u> </u>	<u></u>	<u> </u>	34		orm 990-T (2016)
6X2740 1 0	9255P 177	9		V 1	6-7.16	C	HRISTUS		2	- \

Form	990-T(2016) CHRISTUS HEALTH NORTHERN LOUISIANA	72-0408982	Page 2
Par	Tax Computation		····
35	Organizations Taxable as Corporations. See instructions for tax computation Controlled group	<u> </u>	
	members (sections 1561 and 1563) check here X See instructions and		
а	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)	J	
•	(1) S (2) \$ (3) \$	1	
	Enter organization's share of (1) Additional 5% tax (not more than \$11 750) \$		
U		į	
_	(2) Additional 3% tax (not more than \$100,000)	25-	
36		35c	
30			
		36	
37		37	
38		38	
39		39	
40		40	
Par	IV Tax and Payments		
41 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a	l	
þ	Other credits (see instructions)		
C	General business credit. Attach Form 3800 (see instructions)		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
8		410	
42	· · · · · · · · · · · · · · · · · · ·	42	
43		43	
44	Total tax. Add lines 42 and 43	44	0.
45 a	Payments A 2015 overpayment credited to 2016		
	2016 estimated tax payments		
	Tax deposited with Form 8868		
	Foreign organizations Tax paid or withheld at source (see instructions)		
	Backup withholding (see instructions)		
_	Credit for small emp'oyer health insurance premiums (Attach Form 8941)		
A		Ì	
46		40	3,762.
	, , , , , , , , , , , , , , , , , , ,	46	3,16-5.
47		47	
48		48	2 26/2
49 50	The state of the s	49	3,76∄.
	Enter the amount of line 49 you want: Credited to 2017 estimated tax ▶3,768. Refunded ▶		
Par			
51	At any time during the 2016 calendar year, dld the organization have an interest in or a signature or or		Yes No
	over a financial account (bank, secunties, or other) in a foreign country? If YES, the organization may		
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the fo	oreign country	
	here >		×
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to a foreign	n trust?	×
	If YES see instructions for other forms the organization may have to file.		
53	Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		
	Under penalties of perjury I declare that I have examined this return, including accompanying schedules and statements and to the best true correct and correct—Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	st of my knowledge ar	d bedef it is
Sign	May May	the IRS discuss	his relies
Here		the preparer sho	
		instructions)? X Yes	_
	Print/Type preparer's name d Type are shigh ature (1) Date Check	PTIN	
Paid	KATHLEEN MOSELEY TOUR 1 (15/04/18 self-am		6760
Prep	FIRM'S SAME SERNST & VOLING II S LIB	IN ►34-65655	
Use	July Firm's address ▶ 425 HOUSTON STREET, SUITE 600, FORT WORTH, TX 76102 Phone		
			0-T (20 16)

6X2741 1 000 8 9 2 5 5 P 1 7 7 9

Form 990-T (2016)

Total dividends-received deductions included in column 8.

Schedule F - Interest, Annu	inies, Noyanies			ntrolled Or			0115 (500	Instruction	ons)	
1 Name of controlled organization	2 Employer identification numb	per 3 N	let unrela	ated income nstructions)	4 Total	of specified ents made	ıncluded	of column 4 t I in the contr tion's gross in	olling	6 Deductions directly connected with income in column 5
(1)										
(2)							<u> </u>			
(3)							 			
Noneyempt Centralled Organi		l					L			
Nonexempt Controlled Organia				Tatal of an ass		10 Pa	rt of column	9 that is	11	. Deductions directly
7. Taxable Income	8. Net unrelated ii (loss) (see instruc	_		Total of specific ayments made	ea 	includ	ed in the co ation's gros	ntrolling		nected with in come in column 10
(1)									ļ	
(2)										
(3)										
		· · · · · · · · · · · · · · · · · · ·				Enter	columns 5 a nere and on , line 8, colu	page 1,	Ente	d columns 6 and 11 er here and on page 1, t I, line 8, column (B)
Totals	come of a Sec	tion 501(c)(7)	(9) or (17	Orga	nization	(see ins	tructions)		
1 Description of income	2. Amount of		<u>σχ. γ.</u>	3 Deduction directly corting (attach sch	tions inected	inzation.	4 Se	t-asides schedule)		5 Total ded uctions and set-asides (col 3 plus col . 4)
(1)			+	(attach scr	edule)					plus cot . 4)
(2)									\rightarrow	
(3)		-	1							
(4)										
Totals ▶	Enter here and Part I, line 9, c									Enter here and on page 1 Part I, line 9, ⊂olumn (B)
Schedule I - Exploited Exe	mpt Activity In	come, Oth	ner Th	an Adverti	sing Ir	come (s	see instru	ictions)		·
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expen directi connected production unrelated business in	ses ly i with on of ed	4 Net inconfrom unrelat or business 2 minus col If a gain, c cols 5 thro	ne (loss) ed trade (column umn 3) ompute	5 Gros from ac	s income tivity that inrelated s income	6. Expe attributa colum	able to	7 Excess exempt experises (column 6 minus column 5, but not more than column 4)
(1)				 						
(2)										
(3)									-	
(4)										
_	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,		·		-			Enter here and on page 1, Part II, line 26
Totals ▶ Schedule J - Advertising In	COMP (see instr	uctions)		L						
Part I Income From Per			Oneoli	idated Rac	ie					
1 Name of periodical	2 Gross advertising income	3. Dire	ct	4. Advert gain or (los 2 minus co	ising s) (col il 3) If		culation	6. Read	•	7 Excess readership costs (column 6 minus column 5, but
	monie			a gain, coi cols 5 thro	-					not more than column 4)
(1)				1		ļ		ļ		_
(2)				1				ļ	_	
(3)				4		 		<u> </u>		4
(4)				 		ļ		 		
Totals (carry to Part II, line (5))										Form 990~T (2016

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

72-0408982 Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns Part II 2 through 7 on a line-by-line basis) 7. Excess readership 4 Advertising costs (column 6 gain or (loss) (col 2. Gross 6 Readership 5 Circulation 3. Direct minus column 5, but 2 minus col 3) If advertising 1. Name of periodical costs advertising costs ıncome not more than a gain, compute ıncome column 4) cols 5 through 7 (1) (2) (3) (4) Totals from Part I. Enter here and Enter here and on Enter here and on on page 1, Part II, line 27 page 1, Part I, page 1, Part I, line 11, col (A) line 11, col (B) 4 Compensation attributable to unrelated business (1) % % (2) % (3) (4) %

Form 990-T (2016)

Form 4626

Department of the Treasury Internal Revenue Service

Alternative Minimum Tax - Corporations

► Attach to the corporation's tax return

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

OMB No 1545-0123

2016

Name		Employer	identification number
CHRI	STUS HEALTH NORTHERN LOUISIANA	72-0	408982
	Note: See the instructions to find out if the corporation is a small corporation exempt from the alternative minimum tax (AMT) under section 55(e).	ne	
1	Taxable income or (loss) before net operating loss deduction	. 1	-8,281
2	Adjustments and preferences:	1	
а	Depreciation of post-1986 property	. 2a	
b	Amortization of certified pollution control facilities	. 2b	
C	Amortization of mining exploration and development costs	. 2c	
d	Amortization of circulation expenditures (personal holding companies only)	. 2d	
е	Adjusted gain or loss	. 2e	
f	Long-term contracts	. 2f	
g	Merchant marine capital construction funds	. 2g	
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)	. 2h	
i	Tax shelter farm activities (personal service corporations only)		
j	Passive activities (closely held corporations and personal service corporations only)	. 2j	
k	Loss limitations	. 2k	
- 1	Depletion	. 21	
m	Tax-exempt interest income from specified private activity bonds	. 2m	
n	Intangible drilling costs,	. 2n	
0	Other adjustments and preferences	. 20	
3	Pre-adjustment alternative minimum taxable income (AMTI) Combine lines 1 through 20	. 3	-8,281
4	Adjusted current earnings (ACE) adjustment:		
a b	ACE from line 10 of the ACE worksheet in the instructions	1	
	as a negative amount. See instructions		
С	Multiply line 4b by 75% (0 75) Enter the result as a positive amount 4c	l	
d	Enter the excess, if any, of the corporation's total increases in AMTI from		
	prior year ACE adjustments over its total reductions in AMTI from prior		
	year ACE adjustments See instructions Note: You must enter an amount on line 4d (even if line 4b is positive)	1	
е	ACE adjustment		
	If line 4b is zero or more, enter the amount from line 4c	4e	
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount		
5	Combine lines 3 and 4e If zero or less, stop here, the corporation does not owe any AMT	5	-8,281
6	Alternative tax net operating loss deduction See instructions		
7	Alternative minimum taxable income. Subtract line 6 from line 5 If the corporation held a residu	al	
	interest in a REMIC, see instructions		
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line 8c)		
а	Subtract \$150,000 from line 7 (if completing this line for a member of a		
	controlled group, see instructions) If zero or less, enter -0 8a	}	
b	Multiply line 8a by 25% (0 25)		
С	Exemption Subtract line 8b from \$40,000 (if completing this line for a member of a controlled ground	p,	
	see instructions) If zero or less, enter -0	-	0
9	Subtract line 8c from line 7 If zero or less, enter -0		0
10	Multiply line 9 by 20% (0 20)	. 10	
11	Alternative minimum tax foreign tax credit (AMTFTC) See instructions		
12	Tentative minimum tax Subtract line 11 from line 10	. 12	
13	Regular tax liability before applying all credits except the foreign tax credit	. 13	<u> </u>
14	Alternative minimum tax. Subtract line 13 from line 12 If zero or less, enter -0- Enter here and of		
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	. 14	NONE

Form 8827

Department of the Treasury

Internal Revenue Service

Credit for Prior Year Minimum Tax-Corporations

►Attach to the corporation's tax return.

▶ Information about Form 8827 and its instructions is at www.irs.gov/form8827.

OMB No 1545-0123

2016

Name		Em	ployer identification number
CHF	ISTUS HEALTH NORTHERN LOUISIANA	72-	0408982
1	Alternative minimum tax (AMT) for 2015 Enter the amount from line 14 of the 2015 Form 4626	1	
2	Minimum tax credit carryforward from 2015 Enter the amount from line 9 of the 2015 Form 8827	2	39
3	Enter any 2015 unallowed qualified electric vehicle credit (see instructions)	3	
4	Add lines 1, 2, and 3	4	39
5	Enter the corporation's 2016 regular income tax liability minus allowable tax credits (see		
	instructions)	5	NONE
6	Is the corporation a "small corporation" exempt from the AMT for 2016 (see instructions)?		
	• Yes. Enter 25% of the excess of line 5 over \$25,000 If line 5 is \$25,000 or less, enter -0-		
	• No. Complete Form 4626 for 2016 and enter the tentative minimum tax from line 12	6	NONE
7 a	Subtract line 6 from line 5 If zero or less, enter -0	7a	
b	For a corporation electing to accelerate the minimum tax credit, enter the bonus depreciation		
	amount attributable to the minimum tax credit (see instructions)	7b	
С	Add lines 7a and 7b	7с	
	Enter the smaller of line 4 or line 7c If the corporation had a post-1986 ownership change or		
	has pre-acquisition excess credits, see instructions	8a	
b	Current year minimum tax credit. Enter the smaller of line 4 or line 7a here and on Form 1120, Schedule J, Part I, line 5d (or the applicable line of your return) If the corporation had a		
	post-1986 ownership change or has pre-acquisition excess credits, see instructions. If you made an entry on line 7b, go to line 8c. Otherwise, skip line 8c	8b	
С	Subtract line 8b from line 8a This is the refundable amount for a corporation electing to		
	accelerate the minimum tax credit. Include this amount on Form 1120, Schedule J. Part II, line		
	19c (or the applicable line of your return)	8c	
9	Minimum tax credit carryforward to 2017. Subtract line 8a from line 4 Keep a record of this		
	amount to carry forward and use in future years	9	39_

Instructions

Section references are to the Internal Revenue Code unless otherwise noted

What's New

Modifications to the election to accelerate the minimum tax credit in lieu of claiming the bonus depreciation allowance apply to qualified property placed in service in tax years ending after December 31, 2015 See the instructions for line 7b

Purpose of Form

Corporations use Form 8827 to figure the minimum tax credit, if any, for AMT incurred in prior tax years and to figure any minimum tax credit carryforward

Who Should File

Form 8827 should be filed by corporations that had

- An AMT liability in 2015,
- A minimum tax credit carryforward from 2015 to 2016, or
- A qualified electric vehicle credit not allowed for 2015 (see the instructions for line 3)

Line 3

Enter any qualified electric vehicle credit not allowed for 2015 solely because of tentative minimum tax limitations

Line 5

Enter the corporation's 2016 regular income tax liability (as defined in section 26(b)) minus any credits allowed under Chapter 1, Subchapter A, Part IV, subparts B, D, E, and F of the Internal Revenue Code (for example, if filing Form 1120, subtract any credits on Schedule J, Part I, line 5a, through 5c, from the amount on Schedule J, Part I, line 2)

Line 6

See the 2016 Instructions for Form 4626 to find out if the corporation is treated as a "small corporation" exempt from the AMT for 2016 If the corporation is a "small corporation" exempt from the AMT, see section 38(c)(6) before completing line 6 for special rules that apply to controlled corporate groups

Line 7b

Election To Accelerate Minimum Tax Credit in Lieu of Bonus Depreciation

A corporation can elect to claim unused minimum tax credits in lieu of claiming the special depreciation allowance (bonus depreciation) for qualified property (as defined in section 168(k)(2)) placed in service during the tax year. Once made, this election cannot be revoked without IRS consent.

If the corporation elects to accelerate the minimum tax credit and obtain a refundable credit in lieu of the special depreciation

allowance, complete the Worksheet for Calculating the Refundable Minimu in Tax Credit Amount, later in the instructions Enter the amount from line 9 of the worksheet on Form 8827, line 7b All others, enter zero on line 7b

For fiscal year corporations with tax years beginning in 2015 and ending in 2016, the limitation on the bonus depreciation amount is calculated differently for property placed in service during that fiscal year that is subject to section 168(k)(4), as amended by Public Law 114-113. The fiscal year corporation should modify the worksheet to reflect that different calculation. See section 168(k)(4), as modified.

If a partnership has a single corporate partner that owns (directly or indirectly) more than 50% of the capital and profits interests in the partnership at all times during the tax year, then each partner takes into account its distributive share of partnership depreciation in determ ining its bonus depreciation amount. For more information, see section 168(k)(4)(D)(iii)

For more information on the election to accelerate the minimum tax credit in lieu of claiming the special depreciation allowance, see section 168(k)(4) For more information on the special depreciation allowance, see the Instructions for Form 4562 and Pub 946, How To Depreciate Property

ATTACHMENT 1

NAME AND FEIN OF PARENT CORPORATION

CHRISTUS HEALTH 76-0590551

ATTACHMENT 2

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

SUPPLIES PURCHASED SERVICES OTHER MISCELLANEOUS EXPENSE 19,878.

25,647. 962.

PART II - LINE 28 - OTHER DEDUCTIONS

46,487.

FORM 990T - ORGANIZATIONS TAXABLE AS CORPORATIONS - TAX COMPUTATION

1	TAXABLE INCOME FROM LINE 34, PAGE 1, 990-T	-8,281.
2	LINE 1 OR THE CORPORATION'S SHARE OF THE \$50,000	
	TAXABLE INCOME BRACKET, WHICHEVER IS LESS	-8,281.
3	SUBTRACT LINE 2 FROM LINE 1	•
4	LINE 3 OR THE CORPORATION'S SHARE OF THE \$25,000	
	TAXABLE INCOME BRACKET, WHICHEVER IS LESS	
5	SUBTRACT LINE 4 FROM LINE 3	
6	LINE 5 OR THE CORPORATION'S SHARE OF THE \$9,925,000	
	TAXABLE INCOME BRACKET, WHICHEVER IS LESS	
7	SUBTRACT LINE 6 FROM LINE 5	
8	ENTER 15% OF LINE 2	
9	ENTER 25% OF LINE 4	
10	ENTER 34% OF LINE 6	
11	ENTER 35% OF LINE 7	
12	MEMBER'S SHARE OF ADDITIONAL TAX: (A) 5% OF THE	
	EXCESS OVER \$100,000 OR (B) \$11,750	
13		
	EXCESS OVER \$15 MILLION OR (B) \$100,000	
14		
	LINE 35C, PAGE 2, 990-T	

Christus Health Northern Louisiana

EIN: 72-0408982 Year End: 6/30/17

2016 Form 990-T, Part II, Line 31 - Net Operating Loss Deduction

Date Generated			Amount		Amount	Contribution	
Fiscal Year	Expiration Date	Amount	Previously	Amount	Expired	converted to	
Ended	Fiscal Year Ended	Generated	_ Utilized	Utilized	ın 2016	NOL	Balance
6/30/1998	6/30/2018	1,403,429	(3,175)	-	-		1,400,254
6/30/1999	6/30/2019	1,736,288	-	-	-		1,736,288
6/30/2000	6/30/2020	81,270	-	-	-		81,270
6/30/2001	6/30/2021	1,780,803	-	-	-		1,780,803
6/30/2002	6/30/2022	1,534,094	-	-	-		1,534,094
6/30/2003	6/30/2023	1,001,271	-	-	-		1,001,271
6/30/2004	6/30/2024	205,025	-	-	-		205,025
6/30/2005	6/30/2025	-	-	-	-		-
6/30/2006	6/30/2026	336,683	-	-	-		336,683
6/30/2007	6/30/2027	97,435	-	-	-		97,435
6/30/2008	6/30/2028	1,268,213	-	-	-		1,268,213
6/30/2009	6/30/2029	385,311	-	-	-		385,311
6/30/2010	6/30/2030	-	-	-	-		-
6/30/2011	6/30/2031	-	-	-	-		-
6/30/2012	6/30/2032	1,670	-	-	-		1,670
6/30/2013	6/30/2033	218	-	-	-		218
6/30/2014	6/30/2034	62,846	-	-	-		62,846
6/30/2015	6/30/2035	2,236	-	-	-		2,236
6/30/2016	6/30/2036	1,994	-	-	-		1,994
6/30/2017	6/30/2037	8,281	-		<u>-</u>		8,281
Total carryforward	to 6/30/2018	9,907,067	(3,175)		-	-	9,903,892

	Line 6 - Alternative Min	ımum Tax Net (s Deduction	_		
Date Generated	_		Amount			Contribution	
Fiscal Year	Expiration Date	Amount	Previously	Amount		converted to	
Ended	Fiscal Year Ended	Generated	Utilized	Utilized	2016	NOL	Balance
0/20/4000	0/00/0040	4 400 400	(4.0=0)				4 .5. 454
6/30/1998	6/30/2018	1,403,429	(1,958)	-	-		1,401,471
6/30/1999	6/30/2019	1,736,288	-	-	-		1,736,288
6/30/2000	6/30/2020	81,270	-	-	-		81,270
6/30/2001	6/30/2021	1,780,803	-	-	-		1,780,803
6/30/2002	6/30/2022	1,534,094	-	-	-		1,534,094
6/30/2003	6/30/2023	1,001,271	-	-	-		1,001,271
6/30/2004	6/30/2024	205,025	-	-	-		205,025
6/30/2005	6/30/2025	-	-	-	-		-
6/30/2006	6/30/2026	336,683	-	-	-		336,683
6/30/2007	6/30/2027	97,435	-	-	-		97,435
6/30/2008	6/30/2028	1,268,213	-	-	-		1,268,213
6/30/2009	6/30/2029	385,311	-	-	-		385,311
6/30/2010	6/30/2030	-	-	-	-		-
6/30/2011	6/30/2031	-	-	-	-		-
6/30/2012	6/30/2032	1,503	-	-	_		1,503
6/30/2013	6/30/2033	196	-	-	_		196
6/30/2014	6/30/2034	62,846	_	-	-		62,846
6/30/2015	6/30/2035	2,236	_	-	-		2,236
6/30/2016	6/30/2036	1,994	-	-	-		1,994
6/30/2017	6/30/2037	8,281	-	-	-		8,281
Total carryforward	to 6/30/2018	9,906,898	(1,958)		-	-	9,904,920

7 mm 7 CHMENT	_
ATTACHMENT	5

CHRISTUS HEALTH NORTHERN LOUISIANA FORM 990-T FOR THE FISCAL YEAR ENDED JUNE 30, 2017 EIN: 72-0408982

MINIMUM TAX CREDIT CARRYFORWARD

MINIMUM TAX CREDIT CARRIED FORWAR	RD TO FYE 6/30/18	39*
ALTERNATIVE MINIMUM TAX	FYE 6/30/17	-
ALTERNATIVE MINIMUM TAX	FYE 6/30/16	-
ALTERNATIVE MINIMUM TAX	FYE 6/30/15	-
ALTERNATIVE MINIMUM TAX	FYE 6/30/14	39

^{*} ADJUSTMENT TO MINIMUM TAX CREDIT CARRYFORWARD FOR FYE'S FOR WHICH FORMS 8827 WERE NOT ORIGINALLY FILED.