

Form 990-T

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

OMB No 1545-0687 2017

For calendar year 2017 or other tax year beginning OCT 1, 2017, and ending SEP 30, 2018

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

Open to Public Inspection for 501(c)(3) Organizations Only

A Check box if address changed B Exempt under section 501(c)(3) C Book value of all assets at end of year 90,349,729. D Employer identification number 41-1728753 E Unrelated business activity codes 541200 541610

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

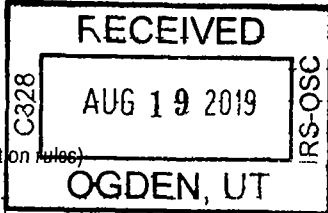
H Describe the organization's primary unrelated business activity. SEE STATEMENT 1 I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No

J The books are in care of KATHY YOUNGQUIST - A&E CARE SERVICE Telephone number 952-855-5000

Table with 4 columns: (A) Income, (B) Expenses, (C) Net. Rows include 1a Gross receipts or sales 5,092,285, 13 Total 5,176,888.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)

Table with 2 columns: Description, Amount. Rows include 14 Compensation of officers, directors, and trustees (Schedule K) 4,896,390, 19 Taxes and licenses 2,743, 25 Employee benefit programs 140,688, 28 Other deductions 103,064, 34 Unrelated business taxable income -115,947.



SEE STATEMENT 3

SCANNED SEP 17 2019

Part III Tax Computation

35 Organizations Taxable as Corporations See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here [X] See instructions and: a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order). (1) \$ (2) \$ (3) \$ b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$ c Income tax on the amount on line 34 35c 0. 36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: [ ] Tax rate schedule or [ ] Schedule D (Form 1041) 36 37 Proxy tax See instructions 37 38 Alternative minimum tax 38 39 Tax on Non-Compliant Facility Income. See instructions 39 40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies 40 0.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 41a 41b 41c 41d 41e 42 Subtract line 41e from line 40 42 0. 43 Other taxes. Check if from: [ ] Form 4255 [ ] Form 8611 [ ] Form 8697 [ ] Form 8866 [ ] Other (attach schedule) 43 44 Total tax. Add lines 42 and 43 44 0. 45a Payments: A 2016 overpayment credited to 2017 45a 39,393. 45b 45c 45d 45e 45f 45g Total 45g 46 Total payments. Add lines 45a through 45g 46 39,393. 47 Estimated tax penalty (see instructions). Check if Form 2220 is attached [ ] 47 48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed 48 49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid 49 39,393. 50 Enter the amount of line 49 you want Credited to 2018 estimated tax 39,393. Refunded 50 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here [ ] Yes [X] No 52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. [ ] Yes [X] No 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 of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Signature of officer: Katty Youngquist 8/15/19 Date CFO Title May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No

Paid Preparer Use Only Print/Type preparer's name: EMILY SCHEEVEL Preparer's signature: [Signature] Date: 8/15/19 Check [ ] if self-employed PTIN: P01814921 Firm's name: CLIFTONLARSONALLEN LLP Firm's EIN: 41-0746749 Firm's address: 220 SOUTH SIXTH STREET, SUITE 300 MINNEAPOLIS, MN 55402 Phone no.: 612-376-4500

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation ► **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3	Cost of labor	3					
4a	Additional section 263A costs (attach schedule)	4a					
b	Other costs (attach schedule)	4b		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes No
5	Total. Add lines 1 through 4b	5					

**Schedule C Rent Income (From Real Property and Personal Property Leased With Real Property)**  
(see instructions)

1 Description of property		
(1)		
(2)		
(3)		
(4)		
2 Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)
		0.

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

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule) <b>STATEMENT 5</b>	(b) Other deductions (attach schedule) <b>STATEMENT 6</b>
(1)				
(2)				
(3)				
(4)	<b>SEE STATEMENT 4</b>			
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) <b>STATEMENT 7</b>	5. Average adjusted basis of or allocable to debt-financed property (attach schedule) <b>STATEMENT 8</b>	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 8 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
			63,558.	149,950.
Total dividends-received deductions included in column 8				0.

**Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					
<b>Nonexempt Controlled Organizations</b>					
7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)					
(2)					
(3)					
(4)					
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B).	
<b>Totals</b>			<b>0.</b>	<b>0.</b>	

**Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization**  
(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
<b>Totals</b>		<b>0.</b>		<b>0.</b>

**Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income**  
(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
	Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)				Enter here and on page 1, Part II, line 28
<b>Totals</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**Schedule J - Advertising Income** (see instructions)

**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals (carry to Part II, line (5))</b>	<b>0.</b>	<b>0.</b>				<b>0.</b>

**Part II** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b>	0.	0.				0.
<b>Totals, Part II (lines 1-5)</b>	0. <small>Enter here and on page 1, Part I, line 11, col (A)</small>	0. <small>Enter here and on page 1, Part I, line 11, col (B)</small>				0. <small>Enter here and on page 1, Part II, line 27</small>

**Schedule K - Compensation of Officers, Directors, and Trustees** (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
<b>Total</b> Enter here and on page 1, Part II, line 14			0.



## FORM 990-T SCHEDULE E - UNRELATED DEBT-FINANCED INCOME STATEMENT 4

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
710 WILLIS STREET	1	12,360.	17,622.	11,689.

4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
50,204.	211,404.	23.75	2,936.	6,961.

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
1609 11 AVENUE S, MINNEAPOLIS	2	16,800.	14,645.	17,467.

4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
42,426.	168,739.	25.14	4,224.	8,073.

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
1521/1523 11 AVENUE S, MINNEAPOLIS	3	60,509.	42,466.	43,135.

4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
151,528.	484,897.	31.25	18,909.	26,750.

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
1517 11TH AVE MINNEAPOLIS, MN	4	34,067.	25,449.	31,360.
4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
177,500.	385,942.	45.99	15,667.	26,126.

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
509 HOPKINS HOUSE	5	22,533.	13,549.	29,949.
4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
250,923.	314,727.	79.73	17,966.	34,681.

1. DESCRIPTION OF PROPERTY	ACTIVITY NUMBER	2. GROSS INCOME	3A. DEPRECIATION EXPENSE	3B. OTHER DEDUCTIONS
80 FREESTONE RD, EAGLE, CO	6	5,680.	30,730.	39,029.
4. AVERAGE ACQ DEBT	5. AVERAGE ADJUSTED BASIS	6. PERCENT (COL 4/COL 5)	7. REPORTABLE GROSS INCOME	8. ALLOCABLE DEDUCTIONS
185,639.	273,443.	67.89	3,856.	47,359.

TOTALS TO FORM 990-T, SCHEDULE E

63,558.

149,950.

FORM 990-T                      SCHEDULE E - DEPRECIATION DEDUCTION                      STATEMENT    5

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
DEPRECIATION		17,622.	
- SUBTOTAL -	1		17,622.
DEPRECIATION		14,645.	
- SUBTOTAL -	2		14,645.
DEPRECIATION		42,466.	
- SUBTOTAL -	3		42,466.
DEPRECIATION		25,449.	
- SUBTOTAL -	4		25,449.
DEPRECIATION		13,549.	
- SUBTOTAL -	5		13,549.
DEPRECIATION		30,730.	
- SUBTOTAL -	6		30,730.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(A)			144,461.

FORM 990-T                      SCHEDULE E - OTHER DEDUCTIONS                      STATEMENT    6

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
INTEREST		1,953.	
REPAIRS & MAINTENANCE		1,561.	
BAD DEBT EXPENSE		100.	
ACCOUNTING FEES		11.	
MANAGEMENT FEES		742.	
LICENSES & PERMITS		102.	
INSURANCE		354.	
AMORTIZATION		311.	
REAL ESTATE TAXES		4,913.	
UTILITIES		425.	
LEGAL FEES		115.	
CONTRACTED SERVICES		1,102.	
- SUBTOTAL -	1		11,689.
INTEREST		1,652.	
UTILITIES		4,676.	
REPAIRS & MAINTENANCE		2,191.	
BAD DEBT EXPENSE		136.	
ACCOUNTING FEES		15.	
MANAGEMENT FEES		1,009.	
CONTRACTED SERVICES		2,615.	
LICENSES & PERMITS		138.	
INSURANCE		481.	
AMORTIZATION		423.	

AUGUSTANA CARE

41-1728753

REAL ESTATE TAXES			3,974.	
LEGAL FEES			157.	
- SUBTOTAL -	2			17,467.
INTEREST			6,376.	
UTILITIES			12,003.	
REPAIRS & MAINTENANCE			3,445.	
BAD DEBT EXPENSE			489.	
ACCOUNTING FEES			56.	
MANAGEMENT FEES			3,634.	
LICENSES & PERMITS			498.	
INSURANCE			1,732.	
AMORTIZATION			1,523.	
CONTRACTED SERVICES			5,805.	
REAL ESTATE TAXES			7,010.	
LEGAL FEES			564.	
- SUBTOTAL -	3			43,135.
INTEREST			7,930.	
UTILITIES			9,929.	
REPAIRS & MAINTENANCE			2,083.	
BAD DEBT EXPENSE			275.	
ACCOUNTING FEES			31.	
MANAGEMENT FEES			2,046.	
CONTRACTED SERVICES			20.	
LICENSES & PERMITS			280.	
INSURANCE			975.	
AMORTIZATION			858.	
REAL ESTATE TAXES			6,616.	
LEGAL FEES			317.	
- SUBTOTAL -	4			31,360.
INTEREST			11,851.	
UTILITIES			816.	
REPAIRS & MAINTENANCE			2,136.	
BAD DEBT EXPENSE			182.	
ACCOUNTING FEES			21.	
MANAGEMENT FEES			1,353.	
LICENSES & PERMITS			185.	
INSURANCE			645.	
AMORTIZATION			567.	
CONTRACTED SERVICES			7,010.	
REAL ESTATE TAXES			4,973.	
LEGAL FEES			210.	
- SUBTOTAL -	5			29,949.
INTEREST			16,878.	
UTILITIES			8,027.	
REPAIRS & MAINTENANCE			206.	
BAD DEBT EXPENSE			46.	
ACCOUNTING FEES			5.	
MANAGEMENT FEES			341.	
LICENSES & PERMITS			9,110.	
INSURANCE			162.	
AMORTIZATION			143.	
REAL ESTATE TAXES			4,058.	
LEGAL FEES			53.	

- SUBTOTAL - 6

39,029.

TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 3(B)

172,629.

FORM 990-T

AVERAGE ACQUISITION DEBT ON OR  
ALLOCABLE TO DEBT-FINANCED PROPERTY

STATEMENT 7

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE ACQUISITION INDEBTEDNESS		50,204.	
- SUBTOTAL -	1		50,204.
AVERAGE ACQUISITION INDEBTEDNESS		42,426.	
- SUBTOTAL -	2		42,426.
AVERAGE ACQUISITION INDEBTEDNESS		151,528.	
- SUBTOTAL -	3		151,528.
AVERAGE ACQUISITION INDEBTEDNESS		177,500.	
- SUBTOTAL -	4		177,500.
AVERAGE ACQUISITION INDEBTEDNESS		250,923.	
- SUBTOTAL -	5		250,923.
AVERAGE ACQUISITION INDEBTEDNESS		185,639.	
- SUBTOTAL -	6		185,639.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 4			858,220.

FORM 990-T

AVERAGE ADJUSTED BASIS OF OR  
ALLOCABLE TO DEBT-FINANCED PROPERTY

STATEMENT 8

DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL
AVERAGE BASIS		211,404.	
- SUBTOTAL -	1		211,404.
AVERAGE BASIS		168,739.	
- SUBTOTAL -	2		168,739.
AVERAGE BASIS		484,897.	
- SUBTOTAL -	3		484,897.
AVERAGE BASIS		385,942.	
- SUBTOTAL -	4		385,942.
AVERAGE BASIS		314,727.	
- SUBTOTAL -	5		314,727.
AVERAGE BASIS		273,443.	
- SUBTOTAL -	6		273,443.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 5			1,839,152.