Form **8868**

(Rev. January 2017)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

forms li Contra	nic filing (e-file). You can electronically file Form 8868 to sted below with the exception of Form 8870, Information R sts, for which an extension request must be sent to the IRS this form, visit www.irs.gov/efile, click on Charities & Non-F	eturn for 1 in paper t	Fransfers Associated With Certain Pe format (see instructions). For more d	ersonal Be etails on tl	nefit		
	natic 6-Month Extension of Time. Only subm			r-ronta.			
	corations required to file an income tax return other than Fo		_ 	e BEMICe	and trusts		
	se Form 7004 to request an extension of time to file income			3, 1 1E1411Q3	, and trusts		
·				Enter filer's identifying number			
					Employer identification number (EIN) or		
Type o					Employer identification number (E		
print	CARROLL HOSPITAL CENTER, INC.			52-1452024			
File by the				Social security number (SSN)			
due date filing your	200 MEMORIAL AVENUE			000101 00	John South Flamber (CON)		
return. Se instructio	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WESTMINSTER, MD 21157						
						01	
Application			Application				
Is For		Code	s For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)		_07		
Form 990-BL		02	Form 1041-A				
Form 4720 (individual)		03	Form 4720 (other than individual)	n individual)			
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069	6069			
Form 990-T (trust other than above)			Form 8870			12	
AMY ENGLE							
• The books are in the care of ▶ 200 MEMORIAL AVE - WESTMINSTER, MD 21157							
Telephone No. ▶ 410-871-7114 Fax No. ▶							
If the organization does not have an office or place of business in the United States, check this box							
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this							
box If it is for part of the group, check this box and attach a list with the names and EiNs of all members the extension is for.							
1 I request an automatic 6-month extension of time until MAY 15, 2019 , to file the exempt organization return							
for the organization named above. The extension is for the organization's return for:							
	► calendar year or X tax year beginning JUL 1, 2017, and ending JUN 30, 2018						
	the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return						
٠	Change in accounting period						
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				\neg			
	nonrefundable credits. See instructions.	. 01 0000,	ones are territative tax, ress arry	За	s	0.	
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3t				s	0.	
	by using EFTPS (Electronic Federal Tax Payment System).	-		3с	s	0.	
_	n: If you are going to make an electronic funds withdrawal				d Form 8879-EO fo		
instruc						•	
LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. Form 8868 (Rev. 1-2017)							