Form **4720**

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service (Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)

Go to www.irs.gov/Form4720 for instructions and the latest information.

For cal	endar year 2022 or other tax year beginning , 2022, and ending	, 20					
Name o	of organization, entity, or person subject to tax	EIN or SSN					
Numbe	r, street, and room or suite no. (or P.O. box if mail is not delivered to street address)	Amended return					
		Check box for type of annual return:					
City or	town, state or province, country, and ZIP or foreign postal code	Form 990 Form 990-EZ					
-		Form 990-PF Other					
		Form 5227					
		Yes No					
Α	Is the organization a foreign private foundation within the meaning of section 4948(b)?						
	Show conversion rate to U.S. dollars. See instructions						
В	Entity (other than the organization) or person subject to tax: Are you required to file Form	4720 with respect to					
	more than one organization in the current tax year? See instructions	-					
	If "Yes," attach a list showing the name and EIN for each organization with respect to which y	ou will file Form 4720 for the					
	current tax year.						
Par	Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))	4943(a), 4944(a)(1), 4945(a)(1),					
1	Tax on undistributed income—Schedule B, line 4	1					
2	Tax on excess business holdings—Schedule C, line 7	2					
3	Tax on investments that jeopardize charitable purpose—Schedule D, Part I, column (f)	3					
4	Tax on taxable expenditures—Schedule E, Part I, column (h)	4					
5	Tax on political expenditures—Schedule F, Part I, column (f)	5					
6	Tax on excess lobbying expenditures—Schedule G, line 4	6					
7	Tax on disqualifying lobbying expenditures—Schedule H, Part I, column (e)	7					
8	Tax on premiums paid on personal benefit contracts	8					
9	Tax on being a party to prohibited tax shelter transactions—Schedule J, Part I, column (h) .	9					
10	Tax on taxable distributions—Schedule K, Part I, column (f)	10					
11	Tax on a charitable remainder trust's unrelated business taxable income. Attach statement .	11					
12	Tax on failure to meet the requirements of section 501(r)(3)—Schedule M, Part II, line 2	12					
13	Tax on excess executive compensation—Schedule N	13					
14	Tax on net investment income of private colleges and universities—Schedule O	14					
15	Total (add lines 1–14)	15					
Part	Taxes on a Manager, Self-Dealer, Disqualified Person, Donor, Donor Advisor (Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 4965(a)(2),						
Name	and address of related organization; city or town, state or province, country, ZIP or foreign postal code	Employer identification number					
1	Tax on self-dealing—Schedule A, Part II, column (d); and Part III, column (d)	1					
2	Tax on investments that jeopardize charitable purposes—Schedule D, Part II, column (d) .	2					
3	Tax on taxable expenditures—Schedule E, Part II, column (d)	3					
4	Tax on political expenditures—Schedule F, Part II, column (d)	4					
5	Tax on disqualifying lobbying expenditures—Schedule H, Part II, column (d)	5					
6	Tax on excess benefit transactions—Schedule I, Part II, column (d); and Part III, column (d) .	6					
7	Tax on being a party to prohibited tax shelter transactions—Schedule J, Part II, column (d) .	7					
8	Tax on taxable distributions—Schedule K, Part II, column (d)	8					
9	Tax on prohibited benefits—Schedule L, Part II, column (d); and Part III, column (d)	9					
10	Total—Add lines 1 through 9	10					
Part							
1	Total tax (Part I, line 15 or Part II, line 10)	1					
2	Total payments including amount paid with Form 8868 (see instructions)	2					
3	Tax due. If line 1 is larger than line 2, enter amount owed (see instructions)	3					
4	Overpayment. If line 1 is smaller than line 2, enter the difference. This is your refund	4					

						on Se	lf-Dealing (Section 4941)	,
Part	Acts of Self-			x Computati	on				
(a) Act number	(b) Date of act	(c) Correct Yes	tion made?				(d) Description of act		
1									
2		İ							
3									
4		ļ	ļ						
5	10 " 1 "								
Ì	e) Question number from Form 990-PF, Part VI-B, or Form 5227, Part VIII, applicable to the act		(f) Amo	unt involved in act		((g) Initial tax on self-dealer (10% of col. (f))		n) Tax on foundation managers (if applicable) sser of \$20,000 or 5% of col. (f))
Part I	Summary of	Tax Lia	ability of	Self-Dealers	s and F	Prorati	ion of Payments		
	(a) Names of so	elf-dealers	liable for tax		(b) Act r Part I,		(c) Tax from Part I, col. (g), or prorated amount		(d) Self-dealer's total tax liability (add amounts in col. (c)) (see instructions)
Part I	Summary of	F Tay Lie	ability of	Foundation	Mana	nore o	nd Proration of Payme	ntc	
alti	Summary Of	I I AX LIC	ability Of	roundation	Iviaiia	yers a		iito	(d) Manager's total tax liability
	(a) Names of founda	ation mana	gers liable for	tax	(b) Act r Part I,		(c) Tax from Part I, col. (h), or prorated amount		(add amounts in col. (c)) (see instructions)
		00:	= -	—				10.43	
	Literaturano e e e e e e e e e e e e e e e e e e e						outed Income (Section 4		1
	Undistributed incor Undistributed incor	-		•			2022, Part XII, line 6d) .	2	
							.ll, line 6e) in 2022 and subject to tax		
	under section 4942							3	
		•						4	

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SCHEDULE C-Initial Tax on Excess Business Holdings (Section 4943)

Rusiness	: Holdings	and Computation of Ta	Y

If you have taxable excess holding	ngs in more than one business enterprise, attach a separate schedule for each enterprise. Re	efer to the
instructions for each line item be	fore making any entries.	

	ave taxable exces ons for each line				ness en	iterprise, atta	ach a separ	ate sched	lule for ea	ich enter	prise. Ref	er to the
Name an	d address of busine	ess enterp	rise									
	er identification nu enterprise (corpo						orship, etc.)	<u></u>				
	F (F		<u> </u>	, , , , , ,		(a) Voting s (profits inte	tock erest or		(b) 'alue		(c) Nonvoting s (capital inter	
1 F	oundation holdin	ige in hus	einass ant	ernrise	1	beneficial ir	nterest) %			%	(
	Permitted holding				2		%			%		
	/alue of excess he				3							
c	Value of excess days; or, other subject to section	value of	excess	holdings not	4							
					5							
 Tax—Enter 10% of line 5 Total tax—Add amounts on line 6, columns (a), (b), and (c); enter total here and on Part I, line 2 				7								
	Did the organization	nt explain	ing (i) cor	rective action ta	oject to	r (ii) why corr	ective action	n has not				es No
Part I	SCHEDULE Investment			s on Investme	ents T	hat Jeopar	dize Char	ritable P	urpose ((Section	4944)	
(a) Investmen number	(b) Date of	(c) Cor	rection de?		ption of investment			(e) Amount of on f		nitial tax foundation ma (if applicabl (lesser of \$10)		managers able)— \$10,000
1 2		Yes	No								or 10% o	f col. (e))
3 4												
5 Total—	 Column (f). Enter	here and	on Part I	, line 3								
Total— Part II	Column (g). Enter											
rait ii	(a) Names of foun			of Foundation	(b) Inv	restment om Part I, ol. (a)	(c) Tax from			(add a	jer's total tax nounts in co e instructions	l. (c))

					s on Tax	kable	e Expenditures (Section	n 4945	o)	
Part I	Expenditure	s and Computa	tion of	Tax							
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Co Yes	rrection	made? No		(e) Nar	me and a	ddress of	recipient	
1											
2											
3											
4											
5											
	(f) Description of e	xpenditure and purpose	es for whic	ch made		Fo	Question number from orm 990-PF, Part VI-B, Form 5227, Part VIII, applicable to the expenditure	10	tial tax im n foundati 1% of col.	posed f on	Initial tax imposed on foundation managers (if applicable) — (lesser of \$10,000 or 5% of col. (b))
		nere and on Part I,					umn (c), below .				
Part II							nd Proration of	Paym	ents		
		ation managers liable fo			(b) Item no Part I, co	. from		rt I, col. ((add a	ger's total tax liability mounts in col. (c)) e instructions)
		CCHEDIII E E	Initial	Toyo	o on Dol	ition	│ II Expenditures(Coatio	n 1055		
Dort I	Eve en dituus				S On Poi	luca	ii Expenditures (Secuc	M 4955)	
Part I	Expenditure	es and Computa	luon oi	ıax							
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Cor mad		(e) De	escript	ion of political expendit	ure	on or	tax imposed ganization oundation of col. (b))	(g) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 21/2% of col. (b))
1											
2		İ			T				†		
3		1			T						
4											
5											
Total - C	olumn (f). Enter h	ere and on Part I, I	ine 5 .								
		otal (or prorated a									
Part II	Summary of	Tax Liability of C	Organiz	ation	Manage	rs or	Foundation Mar	nagers	and P	roration o	of Payments
	(a) Names of or foundation m	rganization managers or nanagers liable for tax	•		(b) Item no Part I, co		(c) Tax from Pa or prorated		g),	(add a	ger's total tax liability mounts in col. (c)) e instructions)

orm 4/20 (2022)								Page :
	SC	HEDUL	EG—Ta	ax on Exc	ess Lobbying	Expenditures	(Section 4911)	
	cess of grass roots 0), Part II-A, column		1						
2 Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990), Part II-A, column (b), line 1i). (See the instructions before making an entry.)									
3 Ex	cess lobbying exper	nditures —	enter the	e larger of l	ine 1 or line 2			3	
4 Ta	x-Enter 25% of line	a 3 here a	nd on Pa	art I line 6				4	
					ualifying Lobb	ying Expenditu	res (Section 4		
Part I	Expenditures a				, ,	, , ,			
(a) Item number	(b) Amount	(c) Date or incur		(d) De:	scription of lobbying	expenditures	(e) Tax impose on organizatio (5% of col. (b	n	(f) Tax imposed on organization managers (if applicable)— (5% of col. (b))
2									
3									
- 4									
	olumn (e). Enter here	and on F	Part I line	· 7					
	olumn (f). Enter total								
Part II									
Part II Summary of Tax Liability of Organization Managers and Proration of Payments (a) Names of organization managers liable for tax (b) Item no. from Part I, col. (a) (c) Tax from Part I, col. (f), or prorated amount								anager's total tax liability Id amounts in col. (c)) (see instructions)	
	SCHI	FDIII F I	_ Initial	Tayes	n Fycess Ren	efit Transactio	ns (Section 40	581	
Part I	Excess Benefit						(0000011 40	<i>50</i> ₁	
(a)			tion made?		omparation.				
Transaction number	(b) Date of transaction	Yes	No	(d) Description of transaction					
1		-							
2		+							
3		+		-					
4 5									
(e) Amount of excess benefit (7) Initial tax on disqualitied persons (25% of col. (a))							(if applic	ration managers cable) or 10% of col. (e))	

	S	CHEDULE I	-Initial Taxes on Exc	ess Benefit	Transactions (Section 495)	8) Continued
Part II					nd Proration of Payments	,
			ersons liable for tax	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col. (c)) (see instructions)
Part III	Summ	ary of Tax	Liability of 501(c)(3). (d	c)(4) & (c)(29)	Organization Managers a	and Proration of Payments
			& (c)(29) organization	(b) Trans. no. from Part I, col. (a)	(c) Tax from Part I, col. (g), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
	SCHE	DUI F.I.T	axes on Reing a Party	to Prohibite	ed Tax Shelter Transaction	s (Section 4965)
Part I						mpt Entity (see instructions)
(a) Transaction number		saction date	(c) Type of transaction 1 — Listed 2 — Subsequently listed 3 — Confidential 4 — Contractual protection	TOT, and Tax	(d) Description of transac	
1						
2						
3						
4						
5						
reason to kno	ow this tran ame a party	entity know or ha saction was a PT to the transactio No	ST (f) Net income attrib	outable	(g) 75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
Total—Co	lumn (h).	Enter here an	 nd on Part I, line 9....			

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Part II	Tax Imposed	on Entity Managers (Section	on 4965) C	ont	inued		·
		entity manager	(b) Transacti number from Part I, col. (a	ion m	(c) Tax—enter \$20,000 for each transaction listed in col. (b) for each manager in col. (a))	(d) Manager's total tax liability (add amounts in col. (c))
	SCHEDULE K-	-Taxes on Taxable Distrib Advised Funds (Se	utions of section 496	Spc 6). S	nsoring Organizations I See the instructions.	Main	taining Donor
Part I	Taxable Distri	ibutions and Tax Computa	ntion				
(a) Item number	(b) Nai	me of sponsoring organization and donor advised fund			(c) Description	n of dist	tribution
1							
2							
3							
4							
(d) [ate of distribution	(e) Amount of distribution	1	(f) Tax imposed on organization (20% of col. (e))	(les	(g) Tax on fund managers ser of 5% of col. (e) or \$10,000)
Fotal—C	column (f). Enter here	e and on Part I, line 10					
		al (or prorated amount) here an	nd in Part II.	col	umn (c), below		
Part II		ax Liability of Fund Manag					
	(a) Name of fund m	nanagers liable for tax	(b) Item no from Part I col. (a)		(c) Tax from Part I, col. (g) or prorated amount		(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)

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SCHEDULE L—Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967).

See the instructions.

Part I	Prohibited Benefit	s and Tax	Computati	on			
(a) Item number	(b) Date of prohibited benefit				(c) Description of be	enefit	
1							
2							
3							
4							
5							
	(d) Amount of prohibited benef	it	(e) Tax on dono	ors, donor advisors, (125% of col. (d) (see instructions))	(lesser of	und managers (if applicable) 10% of col. (d) or \$10,000) (see instructions)
Doub II	Commence of Toy I	ialailita. at	Damara Da	A duin au	Doloted Deve	and Dua	vation of Daymonto
Part II	Summary of Tax L	iability of	Donors, Do	nor Advisors	, Related Pers	sons, and Pro	ration of Payments
	(a) Names of donors, don related persons liab		r	(b) Item no. from Part I, col. (a)	(c) Tax from I or prorate		(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col. (c)) (see instructions)
Part III	Summary of Tax L	iability of	Fund Mana	gers and Pro	ration of Payr	nents	
	(a) Names of fund manage			(b) Item no. from Part I, col. (a)	(c) Tax from or prorate	Part I, col. (f)	(d) Fund manager's total tax liability (add amounts in col. (c)) (see instructions)

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Schedule M-Tax on Hospital Organization for Failure to Meet the Community Health Needs Assessment Requirements (Sections 4959 and 501(r)(3)). (See instructions.) Part I Failures to Meet Section 501(r)(3) (d) Tax year hospital (e) Tax year hospital (a) Item (b) Name of hospital facility (c) Description of the failure facility last conducted facility last adopted an number a CHNA implementation strategy 2 3 4 5 **Computation of Tax** Part II Number of hospital facilities operated by the hospital organization that failed to meet the Community Health Needs Assessment requirements of section 501(r)(3) 1 Tax—Enter \$50,000 multiplied by line 1 here and on Part I, line 12 2 SCHEDULE N-Tax on Excess Executive Compensation (Section 4960). (See instructions.) (a) Item (d) Excess parachute (e) Total. (b) Name of covered employee (c) Excess remuneration payment Add column (c) and (d) number 2 3 4 5 6 Attachment, if necessary. See instructions **Total** (add column (e) items 1–6) Tax. Enter 21% of the amount above here and on Part I, line 13 SCHEDULE O-Excise Tax on Net Investment Income of Private Colleges and Universities (Section 4968) (e) Administrative (c) Gross (f) Net investment (d) Capital gain expenses allocable (a) Name (b) EIN investment income income to income included net income (See instructions.) (See instructions.) in cols. (c) and (d) Filing Organization Related Organization Related Organization Related Organization

Excise Tax on Net Investment Income. Enter 1.4% of the amount in 6(f) here and on Part I, line 14

Total from attachment, if necessary

6

7

Total

Form 4720 (2022) 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 Signature of officer or trustee Title Date Here Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor Date advisor, or related person May the IRS discuss this return with the preparer shown below? (see instructions) Yes Print/Type preparer's name Preparer's signature Date **Paid** Check if self-employed

Preparer

Use Only

Firm's name

Firm's address

Form **4720** (2022)

Firm's EIN

Phone no.