## Form 5330

## Return of Initial Excise Taxes Related to Pension and Profit-Sharing Plans

Department of the Treasury Internal Revenue Service	(Under sections 4971, 49	972, 4973	(a)(2) and 497	3 of the	Internal Re	venue Code)
For taxable year beginn	ing , 1	19	and ending			, 19
Name (see general instruction	ins)				• •	ble box and enter number: Identification number <b>OR</b>
Address (number and street)					Social security number	
City or town, State and ZIP code					(see general i	nstructions)
Name and address of employer whose plan was involved in the prohibited transaction					Employer identification number	
				-	Plan year ending	
Name of plan					Plan number	
Part Taxes on	Failure to Meet Minimum Funding	Standard	<u>s</u>	L		
2 Accumulated funding defic 3 Tax due—Enter the le	tiency in the plan's minimum funding standard attiency in the plan's alternative minimum funding sser of 5% of line 1 or 5% of line 2. E	g standard : nter here	account (see specifi and on line 14	fic instruct		
	cess Contributions to 403(b)(7)(A)		<del></del>	(1)	<u></u>	1
	ited for current year, less rollovers iden om gross income under section 403(b)			(1)		
	ontributions (line 4 less line 5, but not	•	<del>-</del>			
7 Prior year excess contributions not previously eliminated—if zero proceed to line 11						
	line 5 exceeds line 4, enter the excess	-	i -			
	distributions out of the account include	ded in you	r gross income	under se	ection 72(e)	
· · · · · · · · · · · · · · · · · · ·	sed to reduce excess contributions		· · · · · · ·	• • •		
	excess contributions (line 7 less the tot outions (line 6 plus line 10)	ial of lines	sandy).			
	ax—Enter the lesser of 6% of line 11	or 6% of	the value of vol	 ur accou	nt as of the	
	inter here and on line 15				<u> ▶</u>	<u> </u>
	ibited Transactions		<u>-</u> -			
Transaction (see instructions	b. Description of prohibited	d transactio	)n	in p trai	unt involved rohibited insaction instructions)	d. Initial tax on prohibited transaction (5% of column c) (see instructions)
(i)						
(ii)						
(iii)						
	ne sum of amounts listed in column d. E if Taxes Due	inter here	and on line 16.	<del></del>	· · · <b>&gt;</b>	
	<del></del>		<del></del>			1
	minimum funding standard (from line 3 outlines to 403(b)(7)(A) custodial account				L.	
	nsactions (from line 13(b))	•	*			
	itions for self-employed individuals (fro					
	es 14, 15, 16 and 17)		=			
	ax paid upon filing of Form 5558, if ap					
	otract line 18(b) from line 18(a)). Pay Internal Revenue Service)				or money	
Under penalties of pof my knowledge and which preparer has a	perjury, I declare that I have examined this d belief, it is true, correct, and complete. In knowledge.	Declaration	of preparer (oth	er than t	axpayer) is ba	ised on all information of
of my knowledge an which preparer has at				_		
ease						
Your signature		Date	Preparer's address	s (or emp	oyer's name ar	nd address)

27 Excess contributions tax—Enter 6% of line 26 here and on line 17......