

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

Name of the organization

Employer identification number

BusinessName

InCareOfNm

EIN

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- ChurchInd 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
SchoolInd 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
HospitalInd 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
MedicalResearchOrganizationInd medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
HospitalNameAndAddressGrp hospital's name, city, and state: SupportedOrganizationName CityNm StateAbbreviationCd CountryCd
CollegeOrganizationInd An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
GovernmentalUnitInd A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
PublicOrganization170Ind An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
CommunityTrustInd A community trust described in section 170(b)(1)(A)(vii).
AgriculturalResearchOrgInd An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
AgriculturalNameAndAddressGrp university: CollegeUniversityName CityNm StateAbbreviationCd CountryCd
PubliclySupportedOrg509a2Ind An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income.
TestPublicSafetyInd An organization organized and operated exclusively to test for public safety.
SupportingOrganization509a3Ind An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
SupportingOrgType1Ind Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization.
SupportingOrgType2Ind Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s).
SupportingOrgType3FuncIntInd Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s).
SupportingOrgType3NonFuncIntInd Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated.
IRSWrittenDeterminationInd Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations SupportedOrganizationsCnt

g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Rows (A) through (E) and a Total row.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: Gifts, grants, contributions, and membership fees received; Revenues levied for the organization's benefit; Value of services or facilities furnished; Total of lines 1-3; Portion of total contributions by each person exceeding 2%; Public support (line 5 minus line 4).

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: Amounts from line 4; Loss income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; Income from unrelated business activities; Other income; Total support (lines 7-10); Gross receipts from related activities; First 5 years (if applicable).

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage/Box. Rows include: Public support percentage for 2022 (line 14); Public support percentage from 2021 Schedule A, Part II, line 14 (line 15); 33 1/3% support test—2022 (line 16a); 33 1/3% support test—2021 (line 16b); 10%-facts-and-circumstances test—2022 (line 17a); 10%-facts-and-circumstances test—2021 (line 17b); Private foundation (line 18).

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: Gifts/Grants/Contributions/Receipts/Member Fees, Gross Receipts from Admissions, Gross Receipts from Non-Trade or Business Activities, Tax Revenues Levied for the Organization's Benefit, Governmental Services, Total 509(a)(2) Public Support, and Substantiated Disqualified Person Support.

Section B. Total Support

Calendar year (or fiscal year beginning in)

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: Amounts from line 6, Gross Investment Income, Unrelated Business Taxable Income (UBTI), Investment Income and UBTI, Net Income from Other UBTI, and Other Income.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows 15 and 16: Public support percentage for 2022 and 2021.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows 17 and 18: Investment income percentage for 2022 and 2021.

19a 33 1/3% support tests—2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here.

b 33 1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here.

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

Form 990 Sch A Supporting Org Grp

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	<input type="checkbox"/>	<input type="checkbox"/>
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	<input type="checkbox"/>	<input type="checkbox"/>
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	<input type="checkbox"/>	<input type="checkbox"/>
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		
	<input type="checkbox"/>	<input type="checkbox"/>

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a	ContributionControllerInd	
b A family member of a person described on line 11a above?		
11b	ContributionFamilyInd	
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c	Contribution35ControlledInd	

Section B. Type I Supporting Organizations

Form990SchAType1SuprtOrgGrp

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1	PowerAppointMajorityDirTrstInd	
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2	OperateBenefitNonSuprtOrgInd	

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1	MajorityDirTrstSupportedOrgInd	

Section D. All Type III Supporting Organizations

Form990SchAType3SprtOrgAllGrp

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1	TimelyProvidedDocumentsInd	
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2	OfficersCloseRelationshipInd	
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3	SupportedOrgVoiceInvestmentInd	

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.	ActivitiesTestInd	
<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.	ParentSupportedOrgInd	
<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).	ParentSupportedOrgInd	
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
2a	ActivitiesFurtherExemptPrpsInd	
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
2b	ActivitiesEngagedOrgInvmntInd	
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
3a	AppointElectMajorityOfficerInd	
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
3b	ExerciseDirectionPoliciesInd	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 **TrustIntegralPartTestInd** if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
<input type="checkbox"/> AdjustedNetIncomeGrp			
<input type="checkbox"/> NetSTCapitalGainAdjNetIncmGrp	short-term capital gain	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> RecoveriesPYDistributionsGrp	recoveries of prior-year distributions	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> OtherGrossIncomeGrp	Other gross income (see instructions)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> AdjustedGrossIncomeGrp	Add lines 1 through 3.	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> DepreciationDepletionGrp	Depreciation and depletion	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> ProductionIncomeGrp	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> OtherExpensesGrp	Other expenses (see instructions)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> TotalAdjustedNetIncomeGrp	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<input type="checkbox"/> AverageMonthlyFMVOfSecGrp	average monthly value of securities	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> AverageMonthlyCashBalancesGrp	average monthly cash balances	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> FMVOtherNonExemptUseAssetGrp	market value of other non-exempt-use assets	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> TotalFMVOfNonExemptUseAssetGrp	(add lines 1a, 1b, and 1c)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> DiscountClaimedAmt	Discount claimed for blockage or other factors (explain in detail in Part VI):		
<input type="checkbox"/> AcquisitionIndebtednessGrp	acquisition indebtedness applicable to non-exempt-use assets	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> AdjustedFMVLessIndebtednessGrp	subtract line 2 from line 1d.	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).		
<input type="checkbox"/> CashDeemedCharitableGrp		<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> NetVINonExemptUseAssetsGrp	net value of non-exempt-use assets (subtract line 4 from line 3)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> PctOfNetVINonExemptUseAstGrp	multiply line 5 by 0.035.	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> RecoveriesPYDistriMinAssetGrp	recoveries of prior-year distributions	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
<input type="checkbox"/> TotalMinimumAssetGrp	Minimum Asset Amount (add line 7 to line 6)	<input type="checkbox"/> PriorYearAmt	<input type="checkbox"/> CurrentYearAmt
Section C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		<input type="checkbox"/> CYAdjNetIncomeDistributableAmt
2	Enter 0.85 of line 1.		<input type="checkbox"/> CYPct85AdjustedNetIncomeAmt
3	Minimum asset amount for prior year (from Section B, line 8, column A)		<input type="checkbox"/> CYTotalMinAstDistributableAmt
4	Enter greater of line 2 or line 3.		<input type="checkbox"/> CYGreaterAdjustedMinimumAmt
5	Income tax imposed in prior year		<input type="checkbox"/> CYIncomeTaxImposedPYAmt
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		<input type="checkbox"/> CYDistributableAsAdjustedAmt
7	<input type="checkbox"/> FirstYearType3NonFuncInd if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D—Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1 CYPaidAccomplishExemptPrpsAmt
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2 CYPdInExcessIncomeActivityAmt
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3 CYAdministrativeExpensePaidAmt
4	Amounts paid to acquire exempt-use assets	4 ExemptUseAssetsAcquisPaidAmt
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5 QualifiedSetAsideAmt
6	Other distributions (describe in Part VI). See instructions.	6 CYOtherDistributionsAmt
7	Total annual distributions. Add lines 1 through 6.	7 CYTotalAnnualDistributionsAmt
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8 CYDistriAttentiveSuprtOrgAmt
9	Distributable amount for 2022 from Section C, line 6	9 CYDistributableAsAdjustedAmt
10	Line 8 amount divided by line 9 amount	10 CYDistributionYrRt

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			CYDistributableAsAdjustedAmt
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.		UnderdistributionsAmt	
3 Excess distributions carryover, if any, to 2022			
a From 2017	ExcessDistributionCyovYr5Amt		
b From 2018	ExcessDistributionCyovYr4Amt		
c From 2019	ExcessDistributionCyovYr3Amt		
d From 2020	ExcessDistributionCyovYr2Amt		
e From 2021	ExcessDistributionCyovYr1Amt		
f Total of lines 3a through 3e	TotalExcessDistributionCyovAmt		
g Applied to underdistributions of prior years		CyovAppliedUnderdistriPYAmt	
h Applied to 2022 distributable amount			CyovAppliedUnderdistriCPYAmt
i Carryover from 2017 not applied (see instructions)	CarryoverPYNotAppliedAmt		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	ExcessDistributionCyovAmt		
4 Distributions for 2022 from Section D, line 7:			
a Applied to underdistributions of prior years		CYDistriAppUnderdistriPYAmt	
b Applied to 2022 distributable amount			CYDistriAppDistributableAmt
c Remainder. Subtract lines 4a and 4b from line 4.	ExcessDistributionAmt		
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI . See instructions.		RemainingUnderdistriPYAmt	
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			RemainingUnderdistriCYAmt
7 Excess distributions carryover to 2023. Add lines 3j and 4c.	ExcessDistriCyovToNextYrAmt		
8 Breakdown of line 7:			
a Excess from 2018	ExcessFromYear5Amt		
b Excess from 2019	ExcessFromYear4Amt		
c Excess from 2020	ExcessFromYear3Amt		
d Excess from 2021	ExcessFromYear2Amt		
e Excess from 2022	ExcessFromYear1Amt		

