Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990PFfor instructions and the latest information.

Fo	or cal	endar year 2022 or tax year beginning	05/01/2022	and endir	ıg	04/30/20	23			
Na	ıme of	foundation			1	A Employer identific	ation number			
	ANN.	A STINSON TRUST				01-	6057075			
		and street (or P.O. box number if mail is not delivered to	street address)	Room/suite	E	3 Telephone numbe	r (see instructions)			
	490	O TIEDEMAN ROAD OH-01-49-038	1			86	6-238-8650			
		own, state or province, country, and ZIP or foreign posta				000 230 0030				
					0	If exemption applicati	on is			
	RR∩	OKLYN, OH 44144				pending, check here				
		ck all that apply: Initial return	Initial return	of a former public chari	tv/ -					
٦	Cito	Final return	Amended ret	·	י ויי	 1. Foreign organization 2. Foreign organization 				
		X Address change	Name change			85% test, check he	re and attach			
ш	Cho		c)(3) exempt private f		-	computation				
ï					E	If private foundation				
÷		ection 4947(a)(1) nonexempt charitable trust market value of all assets at J Accou	Other taxable pr		_	under section 507(b)	1)(A), check here			
•			ther (specify)	asii Acciuai	F		a 60-month termination			
	16)	-	column (d), must be on c	ach hasia \	-	under section 507(b)	1)(B), check here			
		Ţ <u>01/02/;</u>	column (a), must be on ca	asii basis.)			(d) Disbursements			
L	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net investment	(c)	Adjusted net	for charitable			
		may not necessarily equal the amounts in	expenses per books	income		income	purposes (cash basis only)			
_	_	column (a) (see instructions).)					(casii nasis Ulliy)			
	1	Chack V if the foundation is not required to								
	2	attach Sch. B								
	3	Interest on savings and temporary cash investments-	1 026	1 026			CENTE 1			
	4	Dividends and interest from securities	1,036.	1,036.			STMT 1			
	5a	Gross rents								
	b	Net rental income or (loss)	0.071							
ne	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	-2,871.							
en	ь	assets on line 6a1,647.								
Revenue	7	Capital gain net income (from Part IV, line 2) .								
ш.	8	Net short-term capital gain								
	9	Income modifications								
	IUa	and allowances								
	b	Less: Cost of goods sold .								
	С	Gross profit or (loss) (attach schedule)								
	11	Other income (attach schedule)	1 005	1 000						
_	12	Total. Add lines 1 through 11	-1,835.	1,036.			1 222			
s	13	Compensation of officers, directors, trustees, etc	4,000.	3,000.			1,000.			
ses	14	Other employee salaries and wages		NONE		NONE				
ē	15	Pension plans, employee benefits		NONE		NONE				
Ÿ	16a	Legal fees (attach schedule)								
ē	b	Accounting fees (attach schedule)								
≨ .	С	Other professional fees (attach schedule)								
tra	17	Interest								
nis	18	Taxes (attach schedule) (see instructions). 2.	1,375.							
퉅	19	Depreciation (attach schedule) and depletion .								
ğ	14 15 16a b c 17 18 19 20 21 22 23 24	Occupancy								
ַבַ	21	Travel, conferences, and meetings		NONE		NONE				
a	22	Printing and publications		NONE		NONE				
ng	23	Other expenses (attach schedule)								
ati	24	Total operating and administrative expenses.								
)er		Add lines 13 through 23	5,375.	3,000.		NONE	1,000.			
ŏ	25	Contributions, gifts, grants paid								
_	26	Total expenses and disbursements. Add lines 24 and 25	5,375.	3,000.		NONE	1,000.			
	27	Subtract line 26 from line 12:								
	а	Excess of revenue over expenses and disbursements	-7,210.							
	b	Net investment income (if negative, enter -0-)		-0-						
	C	Adjusted net income (if negative, enter -0-)				NONE				

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Part II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	·
	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	736.	67.	67.
3	Accounts receivable			
	Less: allowance for doubtful accounts			
4	Pledges receivable			
	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule)			
	Less: allowance for doubtful accountsNONE			
8	Inventories for sale or use			
ssets e ø	Prepaid expenses and deferred charges			
₹ 10a	Investments - U.S. and state government obligations (attach schedule)			
b	Investments - corporate stock (attach schedule)			
11°C	Investments - corporate bonds (attach schedule)			
11	Investments - land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule) STMT .3	102,251.	95,710.	81,760.
14	Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
15	Other assets (describe)			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	102,987.	95,777.	<u>81,827.</u>
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
19 20 21	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			
- 22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)		NONE	
ces	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			
	and complete lines 24, 23, 23, and 30.			
24 25 26	Net assets without donor restrictions			
25	Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·			
	Foundations that do not follow FASB ASC 958, check here			
디	and complete lines 26 through 30.	100 00-		
5 26	Capital stock, trust principal, or current funds	102,987.	95,777.	
ပ္ 27	Paid-in or capital surplus, or land, bldg., and equipment fund			
27 28 29	Retained earnings, accumulated income, endowment, or other funds	100 000	AE 555	
₹ 29	Total net assets or fund balances (see instructions)	102,987.	95,777.	
30	Total liabilities and net assets/fund balances (see	100 007	<u> </u>	
	instructions)	102,987.	95,777.	
Part II			1	
	al net assets or fund balances at beginning of year - Part II			100 005
	-of-year figure reported on prior year's return)			102,987.
	er amount from Part I, line 27a			-7,210.
	er increases not included in line 2 (itemize)			<u> </u>
	I lines 1, 2, and 3			95,777.
	reases not included in line 2 (itemize)	E) D : "	5	
o lota	al net assets or fund balances at end of year (line 4 minus lir	ne 5) - Part II, column (b),	line 29 6	95,777.

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Par	t IV Capital Gains	s and Losses for Tax on Inve	estment Income			_
		scribe the kind(s) of property sold (for exrick warehouse; or common stock, 200	• •	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a	PUBLICLY TRADED	SECURITIES				
	OTHER GAINS AND					
	0111211 0112112 11212					
d						
е						
		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	
	(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minu	ıs (g))
a			4,518.			-848.
b	-2,023.					-2,023.
C						
d						
е						
	Complete only for assets sh	nowing gain in column (h) and owned b	y the foundation on 12/31/69.	(1)	Gains (Col. (h) ga	in minus
((i) FMV as of 12/31/69		(k), but not less t Losses (from co	han -0-) or		
a						-848.
b						-2,023.
C						,
d						
e						
2	Capital gain net income	or ingt canital local	ain, also enter in Part I, line 7 pss), enter -0- in Part I, line 7	2		-2,871.
3	Net short-term capital g	ain or (loss) as defined in sections				,
		Part I, line 8, column (c). See ins	•			
	•			3		
Par		ed on Investment Income (Sec	ction 4940(a), 4940(b), or 494		instructions)	
		ons described in section 4940(d)(2), cho				
ıa		letter: (attach			1	NONE
h		dations enter 1.39% (0.0139) of lir		/	•	TVOIVE
b		ne 12, col. (b)				
•					2	NONE
2	•	omestic section 4947(a)(1) trusts and	,, ,	.er -u-)	3	NONE
3				· · · · · ·	4	NONE
4		lomestic section 4947(a)(1) trusts and	• • • • • • • • • • • • • • • • • • • •		5	NONE
5		income. Subtract line 4 from line 3. If ze	ero or iess, enter -U		3	INOINE
6	Credits/Payments:			539.		
a	• •	nts and 2021 overpayment credited to				
b	Exempt foreign organizatio		NONE			
С	Tax paid with application for	NONE				
d	Backup withholding errone			_	F 2 0	
7	• •	. Add lines 6a through 6d			7	539.
8	Enter any penalty for under	rpayment of estimated tax. Check here	if Form 2220 is attached	· · · ·	8	
9		s 5 and 8 is more than line 7, enter amo		⊢	9	
10		nore than the total of lines 5 and 8, ente	·	• • • –	10	539.
<u>11</u>	Enter the amount of line 10	to be: Credited to 2023 estimated tax	x NONE Refur	ded	11	539.

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Par	t VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
,	If "Yes," attach the statement required by <i>General Instruction T</i> .			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
Ü	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
	Enter the states to which the foundation reports or with which it is registered. See instructions.			
oa	ME			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
~	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		Х
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х
1	names and addresses	10		
•	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			- 23
2	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
2		13	X	- 25
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	71	
4	(016)010	_455	.6	
4	The books are in care of <u>KEYBANK, N.A.</u> Telephone no. <u>(216)813</u> Located at <u>4900 TIEDEMAN RD OH-01-49-0150, BROOKLYN, OH</u> ZIP+4 44144	_133		
-				X
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\Box \Delta$
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
6	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority	10	1 63	
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

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Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or			
	use of a disqualified person)?	1a(5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		X
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
C	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2022?	1d		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for			
	tax year(s) beginning before 2022?	2a	X	
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions.)	2b	X	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2022.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2022?	4b		X

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Par	t VI-B Statements Regarding Activities for	or Which Form 47	720 May Be Requ	uired (continued)			
5a	During the year, did the foundation pay or incur any amo	unt to:				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influen	nce legislation (section	n 4945(e))?		5a(1)		X
	(2) Influence the outcome of any specific public	election (see sec	tion 4955); or to	carry on, directly or			
	indirectly, any voter registration drive?				5a(2)		X
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?			5a(3)		X
	(4) Provide a grant to an organization other than	a charitable, etc.,	organization describe	ed in section 4945(d)			
	(4)(A)? See instructions				5a(4)		Χ
	(5) Provide for any purpose other than religious,						
	the prevention of cruelty to children or animals?				5a(5)		X
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e transactions fail	to qualify under the	exceptions described			
	in Regulations section 53.4945 or in a current notice reg	jarding disaster assist	ance? See instructions		5b		
С	Organizations relying on a current notice regarding disas	ter assistance, check	here	[
d	If the answer is "Yes" to question 5a(4), does	the foundation cla	aim exemption from	the tax because it			
	maintained expenditure responsibility for the grant?				5d		
	If "Yes," attach the statement required by Regulations se	ction 53.4945-5(d).					
6a	Did the foundation, during the year, receive any		ndirectly, to pay pre	miums on a personal			
	benefit contract?				6a		Χ
b	Did the foundation, during the year, pay premiums, direc				6b		Х
	If "Yes" to 6b, file Form 8870.	, , , , ,					
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?		7a		Х
b	If "Yes," did the foundation receive any proceeds or have	<i>'</i>			7b		
8	Is the foundation subject to the section 4960 tax	•					
•					8		Χ
Par	excess parachute payment(s) during the year? t VII Information About Officers, Directors	s. Trustees. Four	ndation Managers	. Highly Paid Empl	ovees,		- 21
	and Contractors						
1	List all officers, directors, trustees, and foundation	n managers and tr	(c) Compensation.	(d) Contributions to	/-\ F		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances		
KEYB	NK N.A.	TRUSTEE					
	CANAL PLAZA, PORTLAND, ME 04101	1	4,000.	-0-			-0-
		_	-/***	,			-
2	Compensation of five highest-paid employees	(other than thos	e included on lin	e 1 - see instruction	ns). If no	one.	enter
	"NONE."						
	News and address of each construction with a decorate	(b) Title, and average	(1) 0	(d) Contributions to employee benefit	(e) Expens	e accou	ınt.
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	owance	s
				compensation			
NON	F.		NONE	NONE	N	ONE	
LVOIV	ш		NONE	NONE		OIVE	
		1		1			

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3 Five highest-paid independent contractors for professional services. See instru	ctions. If none, enter "NONE	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
JONE		NONE
otal number of others receiving over \$50,000 for professional services		NONE
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical i organizations and other beneficiaries served, conferences convened, research papers produced, etc.	nformation such as the number of	Expenses
1 <u>NONE</u>	_	
2		
·		
3		
	_	
4		
Part VIII-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2.	Amount
1 <u>NONE</u>		
	_	
2		
All other program-related investments. See instructions.		
3 NONE		
otal. Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·		

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Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	eign foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	81,325.
b	Average of monthly cash balances	1b	NONE
С	Fair market value of all other assets (see instructions)	1c	NONE
d			81,325.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d		81,325.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see		
	instructions)	4	1,220.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	80,105.
6	Minimum investment return. Enter 5% (0.05) of line 5		4,005.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations, check here and do not complete this part.)	g foundation	S
1	Minimum investment return from Part IX, line 6	1	4,005.
2 a	Tax on investment income for 2022 from Part V, line 5 2a NONE	₫	
b			
С	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,005.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	4,005.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII,		
	line 1	7	4,005.
Par	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,000.
b	Program-related investments - total from Part VIII-B	1b	•
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а		3a	NONE
h	Cash distribution test (attach the required schedule)	2h	NONE

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Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4

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Pa	rt XII Undistributed Income (see instru	uctions)			
		(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1	Distributable amount for 2022 from Part X, line 7				4,005.
	Undistributed income, if any, as of the end of 2022:				,
	Enter amount for 2021 only			4,292.	
b	Total for prior years: 20_20_,20,20		1,218.	·	
	Excess distributions carryover, if any, to 2022:		·		
а	From 2017 NONE				
b	From 2018 NONE				
С	From 2019 NONE				
	From 2020 NONE				
е	From 2021 NONE				
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2022 from Part XI,				
	line 4: \$ 1,000.				
а	Applied to 2021, but not more than line 2a			1,000.	
	Applied to undistributed income of prior years				
	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				
·	required - see instructions)	NONE			
d	Applied to 2022 distributable amount				NONE
	Remaining amount distributed out of corpus	NONE			
5	Excess distributions carryover applied to 2022				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	NONE			NONE
6	Enter the net total of each column as				
_	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	NONE			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		1,218.		
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed		1,218.		
d	Subtract line 6c from line 6b. Taxable				
	amount - see instructions				
е	Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount - see				
	instructions			3,292.	
f	Undistributed income for 2022. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2023				4,005.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
8	Excess distributions carryover from 2017 not				
	applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2023.				
	Subtract lines 7 and 8 from line 6a	NONE			
	Analysis of line 9:				
	Excess from 2018 NONE				
	Excess from 2019 NONE				
	Excess from 2020 NONE				
	Excess from 2021 NONE				
е	Excess from 2022 NONE				

Form **990-PF** (2022)

Form 990-PF (2022)

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation and the ruling is effective for 2022, enter the date of the ruling.

1a	If the foundation has	received a ruling or	determination	letter tha	t it is a priv	ate opera	ting					
	foundation, and the ruling	g is effective for 2022,	enter the date o	f the ruling			L					
b	Check box to indicate v	whether the foundation	on is a private	operating	foundation de	scribed in	section		4942(j)	(3) or	4942(j)	(5)
2 a	Enter the lesser of the ad-	Tax year			Prior 3 y	ears/					(e) Total	
	justed net income from Part	(a) 2022	(b) 20	021	(c) 20	20		(d) 201	9		(e) Total	
	I or the minimum investment return from Part IX for each											
	year listed											
b	85% (0.85) of line 2a											
	Qualifying distributions from Part											
·	XI, line 4, for each year listed .											
d	Amounts included in line 2c not											
	used directly for active conduct of exempt activities											
е	Qualifying distributions made											
_	directly for active conduct of											
	exempt activities. Subtract line 2d from line 2c											
3	Complete 3a, b, or c for the											
_	alternative test relied upon:											
а	"Assets" alternative test - enter: (1) Value of all assets											
	(2) Value of assets qualifying											
	under section											
b	4942(j)(3)(B)(i) "Endowment" alternative test-											
	enter 2/3 of minimum invest-											
	ment return shown in Part IX,											
c	line 6, for each year listed "Support" alternative test - enter:											
·	(1) Total support other than											
	gross investment income											
	(interest, dividends, rents, payments on securities											
	loans (section 512(a)(5)),											
	or royalties) (2) Support from general											
	public and 5 or more											
	exempt organizations as provided in section 4942											
	(j)(3)(B)(iii)											
	port from an exempt											
	organization (4) Gross investment income .											
Dai	· · · · · · · · · · · · · · · · · · ·	⊥ ntary Information	/Complete	thic nart	only if the	founda	tion h	ad \$5	000 0	more	in accate	
Га		uring the year - se			only it the	iouilua	tion ii	au yo	,000 01	IIIOIE	111 055615	а
1	Information Regarding	·		,								
	List any managers of			uted mor	e than 2% o	f the tota	ıl contri	bution	s receiv	ed bv t	he foundat	tior
	before the close of any	tax year (but only i	f they have cor	ntributed r	more than \$5,	,000). (Se	e sectio	on 507	'(d)(2).)	,		
	N/A											
b	List any managers of	the foundation wh	o own 10% c	or more o	f the stock of	of a corp	oration	(or an	egually	large i	portion of	the
	ownership of a partner								,,			
						-						
	N/A											
2	Information Regarding	Contribution, Grav	nt, Gift, Loan,	Scholarsh	ip, etc., Prog	rams:						
		he foundation only					tahla o	raaniz	atione a	nd doe	e not acc	ont
	unsolicited requests for											
	complete items 2a, b,			g, g	,,			J				
а	The name, address, an			ess of the	person to wh	nom annli	cations	should	d be add	ressed:		_
u	SEE STATEMENT !	_	. J. Jilian adal	300 01 1110	p0.0011 to WI	аррп	56410110	J.1541	25 aaa	. 555541		
h	The form in which app		submitted and	information	on and materi	ials thev s	should i	nclude	<u> </u>			
	SEE ATTACHED ST			o.mati	יום ווים ווים נכוו	ialo tiloy s	,,,ouiu i		•			
	SEE ALIACHED S.	TATEMENT LOK	דווק ק									
c	Any submission deadli	nes:										
·	SEE ATTACHED ST		TTME 2									
	DEE ALLACHED S.	THIEMPINI LOK	TINE 7									

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

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Form 990-PF (2022) Page **11** Part XIV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Purpose of grant or Amount contribution Name and address (home or business) **a** Paid during the year **b** Approved for future payment

Form **990-PF** (2022)

Total

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Page **12**

Form 990-PF (2022)

Analysis of Income-Producing Activities

	nter gross amounts unless otherwise indicated.		Unrelated business income		section 512, 513, or 514	(e) Related or exempt		
1 Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)		
a								
f								
g Fees	and contracts from government agencies							
2 Member	ship dues and assessments							
3 Interest o	n savings and temporary cash investments -							
4 Dividend	ds and interest from securities			14	1,036.			
5 Net renta	al income or (loss) from real estate:							
a Debt-	-financed property							
b Not o	debt-financed property							
6 Net renta	Il income or (loss) from personal property							
7 Other in	vestment income							
8 Gain or (le	oss) from sales of assets other than inventory			18	-2,871.			
9 Net inco	me or (loss) from special events							
10 Gross pr	ofit or (loss) from sales of inventory							
11 Other re	venue: a							
_								
е								
12 Subtotal	. Add columns (b), (d), and (e)				-1,835.			
13 Total. A	dd line 12, columns (b), (d), and (e)				13	-1,835.		
	eet in line 13 instructions to verify calcu							
Part XV-	Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses			
Line No.	Explain below how each activity for of the foundation's exempt purpose					tly to the accomplishment		
	l l l l l l l l l l l l l l l l l l l	s (Other than	n by providing funds for su	ch purposes)	. (See instructions.)	,		
	p.p.p.	s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		is former than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than	n by providing funds for su	ch purposes)	. (See instructions.)			
		s (other than			. (See instructions.)			
		s (other than	NOT APPLICABL		. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Ottle) that			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Other than			. (See instructions.)			
		S (Ottle) that			. (See instructions.)			
		S (Ottlef tilal			. (See instructions.)			
					. (See instructions.)			
					. (See instructions.)			
JSA					. (See instructions.)	Form 990-PF (2022)		

Part XV-A

Form 990-PF (2022) 01-6057075

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the	organization di	rectly or indirectly	engage in	any of the follo	owing wi	ith any	other orga	nization (described		Yes	No
			ther than section										
	organiz								Ü	•			
а	_		orting foundation to	a noncharit	able exempt o	rganizatio	on of:						
					· ·	_					1a(1)		Х
	• •										1a(2)		X
b		ransactions:											
-			noncharitable exen	ont organiza	ation						1b(1)		Х
			from a noncharitat	-									X
			equipment, or other		-								X
			angements										X
			intees										X
		_	vices or membershi										X
С			uipment, mailing lis		-								X
	_		of the above is "Ye									fair m	
u		•	her assets, or servi	•		-				•			
			n or sharing arrang										
(a) Li	ne no.	(b) Amount involve			xempt organization					tions, and shar			
(4, 2,	110 110.	(b) / tilloulle involve	(b) Italiio of i	TOTIONATICADIO O	Actinpt organization	·	(4) D00011	ption of transi	010, 11 0110001	ilono, una ona	mig arra	ngomo	
	la tha f	foundation direc	ctly or indirectly af	filiated with	or related to		more	tay ayamat	t organiz	otiono			
Za			on manectly and 11(c) (other than see						_	Г		es 🗆	Z No
h			ollowing schedule.	טווטוו טטוועט	((3)) Of the Section	011 527:				[-S 2	7 140
	11 103,	(a) Name of organ		(h) Type of organizati	ion			(c) Descripti	on of relations	shin		
		(a) Harris or organ	ization	(μ	, Typo or organizati			'	(o, Bosonpti	011 01 101011011	ыпр		
							+						
	Unde	r penalties of periury.	I declare that I have exan	nined this return	, including accompan	nvina schedu	les and st	atements, and	to the best of	of my knowledg	ge and b	elief, it	is true.
	corre		ration of preparer (other than								,	,	
Sigr	$1 \mid \mathcal{U}$	Janus X (mura	lna	/20/2024	7.7	ייטה ד	אים כי די טים מי	יחד	May the IRS			
Here		eggy so-c	7.0(/29/2024			PRESIDEN	NI	with the pre		7 6	
	Sign	atule of ficer or tru		Date	•	Title	;			See instruction	ıs. X	Yes	No
	K.E	YBANK BY:P Print/Type prepare		Dranar	a signatura			Date		37 1	PTIN		
Paid	l	/		rreparer	s signature	2/1	20		Che	21 II		F 2 2 2	11
	arer	JEFFREY E			SYPF E	Kuh	lori	02/29/2	i '		P003		<u>) </u>
_		Firm's name	PWC US TAX I						Firm's EIN	92-	<u>0460</u>	586	
use	Only	Firm's address		LBACK RO	AD STE 475					440 -			
			PHOENIX, AZ	<u>′</u>		85018			Phone no.	412-3		000 DE	10000

Form **990-PF** (2022)

ANNA STINSON TRUST 01-6057075

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
DOMESTIC DIVIDENDS CORPORATE INTEREST NONQUALIFIED DOMESTIC DIVIDENDS		1,010. 2. 24.	1,010. 2. 24.
	TOTAL	1,036.	1,036.

01-6057075 ANNA STINSON TRUST

FORM 990PF, PART I - TAXES

AND EXPENSES DESCRIPTION PER BOOKS _____

FEDERAL TAX PAYMENT - PRIOR YE 836. FEDERAL ESTIMATES - PRINCIPAL 539.

> TOTALS 1,375.

==========

REVENUE

FORM 990PF, PART II - OTHER INVESTM	ENTS		
DESCRIPTION	==== COST/ FMV C OR F 	ENDING BOOK VALUE	ENDING FMV
998156269 CHARITABLE MULTI ASS	С	95,710.	81,760.
	TOTALS	95.710.	

01-6057075 ANNA STINSON TRUST

GAINS AND LOSSES FROM PASS-THRU ENTITIES _____

NET LONG-TERM GAIN (LOSS) FROM PARTNERSHIPS, S CORPORATIONS AND OTHER FIDUCIARIES

COMMON TRUST FUNDS

-2,023.00

TOTAL NET LONG-TERM GAIN OR LOSS (ROUNDED)

-2,023.00

=========

ANNA STINSON TRUST FORM 990PF, PART XIV - LINES 2a - 2d

RECIPIENT NAME:

BRANCH MANAGER, KEYBANK

ADDRESS:

162 HIGH STREET ELLSWORTH, ME 04605

RECIPIENT'S PHONE NUMBER: 207-669-3051

FORM, INFORMATION AND MATERIALS:

WRITTEN

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS: HIGH SCHOOL GRADUATES FROM SURREY, MAINE OR

ELLSWORTH, MAINE

Form **4720**

Return of Certain Excise Taxes Under Chapters

41 and 42 of the Internal Revenue Code (Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form4720for instructions and the latest information.

For calendar year 2022 or other tax year beginning $05/01$, 2022, and end	ding 04/30 , 20 23
Name of organization, entity, or person subject to tax	EIN or SSN
ANNA STINSON TRUST	01-6057075
Number, street, and room or suite no. (or P.O. box if mail is not delivered to street address)	Amended return
4900 TIEDEMAN ROAD OH-01-49-0381	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
	X Form 990-PF Other
BROOKLYN OH 44144	Form 5227
	Yes No
A Is the organization a foreign private foundation within the meaning of section 494	8(b)? X
Show conversion rate to U.S. dollars. See instructions	
B Entity (other than the organization) or person subject to tax: Are you required	
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	
current tax year.	•
Part I Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912	(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1),
4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))	
1 Tax on undistributed income - Schedule B, line 4	1 988.
2 Tax on excess business holdings - Schedule C, line 7	
3 Tax on investments that jeopardize charitable purpose - Schedule D, Part I, column	
4 Tax on taxable expenditures - Schedule E, Part I, column (h)	
5 Tax on political expenditures - Schedule F, Part I, column (f)	
6 Tax on excess lobbying expenditures - Schedule G, line 4	
7 Tax on disqualifying lobbying expenditures - Schedule H, Part I, column (e)	
8 Tax on premiums paid on personal benefit contracts	
9 Tax on being a party to prohibited tax shelter transactions - Schedule J, Part I, colu	
10 Tax on taxable distributions - Schedule K, Part I, column (f)	
11 Tax on a charitable remainder trust's unrelated business taxable income. Attach st	
12 Tax on failure to meet the requirements of section 501(r)(3) - Schedule M, Part II,	
13 Tax on excess executive compensation - Schedule N	
14 Tax on net investment income of private colleges and universities - Schedule O	
15 Total (add lines 1-14)	
Part II Taxes on a Manager, Self-Dealer, Disqualified Person, Donor, I	
(Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 49	
Name and address of related organization; city or town, state or province, country, ZIP or foreign post	
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, colun	
3 Tax on taxable expenditures - Schedule E, Part II, column (d)	
4 Tax on political expenditures - Schedule F, Part II, column (d)	
5 Tax on disqualifying lobbying expenditures - Schedule H, Part II, column (d)	
6 Tax on excess benefit transactions - Schedule I, Part II, column (d); and Part III, column	
7 Tax on being a party to prohibited tax shelter transactions - Schedule J, Part II, colo	
8 Tax on taxable distributions - Schedule K, Part II, column (d)	
9 Tax on prohibited benefits - Schedule L, Part II, column (d); and Part III, column (d)	
10 Total - Add lines 1 through 9 · · · · · · · · · · · · · · · · · ·	
Part III Tax Payments	
1 Total tax (Part I, line 15 or Part II, line 10)	1 988.
2 Total payments including amount paid with Form 8868 (see instructions)	
3 Tax due. If line 1 is larger than line 2, enter amount owed (see instructions)	
4 Overpayment. If line 1 is smaller than line 2, enter the difference. This is your refu	
For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	Form 4720 (2022)

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	,	SC	HEDU	I F Δ - Initia	al Taxes on Se	If-Dealing (Section 494)	1)	037073
Part I	Acts of Se			ax Computa		in Dealing (Bestian 484	· /	
(a) Act			tion made					
number	(b) Date of act	Yes	No			(d) Description of act		
1								
2								
3								
4								
5								
	luestion number from art VI-B, or Form 522		F,	(f) Amount i	nvolved in act	(g) Initial tax on self-dealer		h) Tax on foundation managers (if applicable)
	applicable to th	e act				(10% of col. (f))	(le:	sser of \$20,000 or 5% of col. (f))
-								
Part II	Summary	of Tax Li	ability	of Self-Deale	ers and Proration	of Payments		
·					(b) Act no. from	(c) Tax from Part I, col. (g),		(d) Self-dealer's total tax liability
	(a) Names of	self-dealers li	able for tax	[Part I, col. (a)	or prorated amount		(add amounts in col. (c)) (see instructions)
								_
								_
								_
								-
Part III	Summary	of Tax Li	ability o	of Foundatio	n Managers and	d Proration of Payments		
					(b) Act no. from	(c) Tax from Part I, col. (h),		(d) Manager's total tax liability
	(a) Names of found	dation manag	jers liable t	or tax	Part I, col. (a)	or prorated amount		(add amounts in col. (c)) (see instructions)
								_
								-
								-
		90	HEDLILI	R - Initial T	av on Undietrik	uted Income (Section 494	2)	
1 Lin	distributed inco					2022, Part XII, line 6d)	1	
						, line 6e)	2	3,292.
						n 2022 and subject to tax		5,252.
							3	3,292.
							4	988.

01-6057075 Form 4720 (2022)

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

Business	Holdings	and	Computation	of Tax	X
-----------------	-----------------	-----	-------------	--------	---

If you have t	axable excess	holdings	in more	than one	business	enterprise,	attach	a separate	schedule	for each	enterprise.	Refer to	the
instructions 1	for each line it	em before	making	any entri	es.								

Name and address of business enterprise Form of enterprise (corporation, partnership, trust, joint venture, sole proprietorship, etc.). (c) Voting stock (b) Nonvoting stock (profits interest or Value (capital interest) beneficial interest) 1 Foundation holdings in business enterprise Permitted holdings in business enterprise Value of excess holdings in business enterprise 4 Value of excess holdings disposed of within 90 days; or, other value of excess holdings not subject to section 4943 tax (attach statement) Taxable excess holdings in business enterprise-**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 Yes No Did the organization dispose of excess holdings subject to tax reported on line 6?.......... Attach a statement explaining (i) corrective action taken, or (ii) why corrective action has not been taken. SCHEDULE D - Initial Taxes on Investments That Jeopardize Charitable Purpose (Section 4944)

Part I	Investments	and Ta	x Com	outation			
(a) Investment number	(b) Date of investment		rrection ide?	(d) Description of investment	(e) Amount of investment	(f) Initial tax on foundation (10% of col. (e))	(g) Initial tax on foundation managers (if applicable) - (lesser of \$10,000 or 10% of col. (e))
1							
2							
3							
4							
5							
Total - Co	Total - Column (f). Enter here and on Part I, line 3						

Part II	Summary of	Tax Liability o	f Foundation	Managers	and Proration	of Payments
	Sullilliai v O	ι ιαχ μιαριπίν υ	ı Fuulluatiuli	IVIAIIAUEIS	anu Fronation	UI Favillellis

(a) Names of foundation managers liable for tax	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)

Page 4

01-6057075 Form 4720 (2022) SCHEDULE E - Initial Taxes on Taxable Expenditures (Section 4945) **Expenditures and Computation of Tax** Part I (d) Correction made? (a) Item (c) Date paid (b) Amount (e) Name and address of recipient or incurred number Yes Nο 2 3 4 5 (g) Question number from (i) Initial tax imposed on Form 990-PF, Part VI-B, or Form 5227, Part VIII, (h) Initial tax imposed foundation managers (f) Description of expenditure and purposes for which made on foundation (if applicable) -(lesser of \$10,000 (20% of col. (b)) applicable to the or 5% of col. (b)) expenditure Total - Column (i). Enter total (or prorated amount) here and in Part II, column (c), below Summary of Tax Liability of Foundation Managers and Proration of Payments (d) Manager's total tax liability (b) Item no. from (c) Tax from Part I, col. (i), (a) Names of foundation managers liable for tax (add amounts in col. (c)) Part I, col. (a) or prorated amount (see instructions) SCHEDULE F - Initial Taxes on Political Expenditures (Section 4955) **Expenditures and Computation of Tax** Part I (g) Initial tax imposed (f) Initial tax imposed on managers (d) Correction (a) Item (c) Date paid on organization (b) Amount (if applicable) (e) Description of political expenditure made? number or incurred or foundation (lesser of \$5,000 (10% of col. (b)) or 2 1/2% of col. (b)) Yes No 1 2 3 4 5 Total - Column (f). Enter here and on Part I, line 5..... Total - Column (g). Enter total (or prorated amount) here and in Part II, column (c), below Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments Part II (d) Manager's total tax liability (a) Names of organization managers or (b) Item no. from (c) Tax from Part I, col. (g), (add amounts in col. (c)) foundation managers liable for tax Part I, col. (a) or prorated amount (see instructions)

01-6057075 Form 4720 (2022) Page 5 SCHEDULE G - Tax on Excess Lobbying Expenditures (Section 4911) Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990), Part II-A, column (b), line 1h). (See the instructions before making an entry.) 1 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.) 2 3 SCHEDULE H - Taxes on Disqualifying Lobbying Expenditures (Section 4912) **Expenditures and Computation of Tax** Part I (f) Tax imposed on (e) Tax imposed (a) Item (c) Date paid organization managers (b) Amount (d) Description of lobbying expenditures on organization number or incurred (if applicable) -(5% of col. (b)) (5% of col. (b)) 1 2 3 4 5 Total - Column (f). Enter total (or prorated amount) here and in Part II, column (c), below Part II Summary of Tax Liability of Organization Managers and Proration of Payments (d) Manager's total tax liability (b) Item no. from (c) Tax from Part I, col. (f). (a) Names of organization managers liable for tax (add amounts in col. (c)) Part I. col. (a) or prorated amount (see instructions) SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958) **Excess Benefit Transactions and Tax Computation** Part I (a) (c) Correction made? (d) Description of transaction (b) Date of transaction Transaction number No 2 3 4 5 (g) Tax on organization managers (f) Initial tax on disqualified persons (e) Amount of excess benefit (if applicable) (25% of col. (e)) (lesser of \$20,000 or 10% of col. (e))

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SCHEDULE I - Initial Taxes on Excess Benefit Transactions (Section 4958) Continued Summary of Tax Liability of Disqualified Persons and Proration of Payments Part II **(b)** Trans. no. from Part I, (d) Disqualified person's total tax (c) Tax from Part I, col. (f), (a) Names of disqualified persons liable for tax liability (add amounts in col. (c)) (see instructions) or prorated amount col. (a) Summary of Tax Liability of 501(c)(3), (c)(4) & (c)(29) Organization Managers and Proration of Payments (b) Trans. no. from Part I, (d) Manager's total tax liability (a) Names of 501(c)(3), (c)(4) & (c)(29) organization (c) Tax from Part I, col. (g), (add amounts in col. (c)) managers liable for tax or prorated amount col. (a) (see instructions) SCHEDULE J - Taxes on Being a Party to Prohibited Tax Shelter Transactions (Section 4965) Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity (see instructions) Part I (c) Type of transaction (a) 1 - Listed (d) Description of transaction Transaction (b) Transaction date 2 - Subsequently listed number - Confidential 4 - Contractual protection 1 2 3 4 5 (e) Did the tax-exempt entity know or have (h) Tax imposed on reason to know this transaction was a PTST (f) Net income attributable (g) 75% of proceeds attributable the tax-exempt entity when it became a party to the transaction? to the PTST to the PTST (see instructions) Yes No

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Part II	Tax Imp	osed on Entity Managers (Sec	tion 496	55) <i>Co</i>	ntin	ued	<u> </u>	0007070
	(a)	Name of entity manager	numb	nsaction er from col. (a)		(c) Tax - enter \$20 each transaction list for each manager	ed in col. (b)	(d) Manager's total tax liability (add amounts in col. (c))
			ds (Sec			oonsoring Organ). See the instruc		ntaining Donor
Part I	Taxable	Distributions and Tax Comput	ation					
(a) Item number		nd				(c) Description o	of distribution	
1								
2								
3								
4								
				(5) To		osed on organization	(m)	Toy on fund managers
(d) Date	of distribution	(e) Amount of distribution		(1) 16	(20	0% of col. (e)) (lesser		Tax on fund managers of 5% of col. (e) or \$10,000)
	0 1 (6) 5	<u> </u>						
		nter here and on Part I, line 10 Enter total (or prorated amount) her		Part II	colu	mn (c) helow		
Part II		ry of Tax Liability of Fund Man						
		of fund managers liable for tax	(b) Item from Pa col. (a	no. art I,		(c) Tax from Part I, or prorated am		(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
				,				(**************************************
								- 4720

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SCHEDULE L - Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967). See the instructions.

Part I	Prohibited Benefits an	nd Tax Computation	n				
(a) Item number	(b) Date of prohibited benefit			(c) Descript	tion of benefit		
1							
2							
3							
4							
5							
(d)	Amount of prohibited benefit	(1	donor advisors, or relate 125% of col. (d)) see instructions)	ed persons		on fund managers (if applicable) of 10% of col. (d) or \$10,000) (see instructions)	
Part II	Summary of Tax Liabi	lity of Donors, Dono	or Advisors, Rel	ated Per	sons, and Pror	ration of Payments	
	(a) Names of donors, donor advisors, or related persons liable for tax			(c) Tax from Part I, col. (e) or prorated amount		(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 Liabi	lity of Fund Manage	ers and Proratio	n of Pay	ments		
	(a) Names of fund managers li	able for tax	(b) Item no. from Part I, col. (a)		from Part I, col. (f) orated amount	(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 Ro	equirements (Sec	tions 4959 and	501(r)(3)). (See ir	nstructio	ns.)	
Part I	Failures to M	leet Section 50)1(r)(3)						
(a) Item number	(h) Name of hos	pital facility	(c) Desc	cription of the failure			Tax year ho ity last cond a CHNA		(e) Tax year hospital facility last adopted an implementation strategy
1									
2									
3									
4									
5									
Part I	Computation	of Tax							
1 N	lumber of hospital	facilities operated	by the hospital org	janization that faile	d to meet the	Com	munity		
Н	lealth Needs Asses	sment requireme	nts of section 501(r	r)(3)				1	
2 T	ax - Enter \$50,000	multiplied by lin	e 1 here and on Par	rt I, line 12				2	
	SCHED	ULE N - Tax or	Excess Executiv	e Compensation	(Section 4	960).	(See ins	truction	าร.)
(a) Item number	(h) Name of cover	red employee	(c) Ex	cess remuneration		(d) Excess parachute payment			(e) Total. Add column (c) and (d)
1									
2									
3									
4									
5									
6	Attachment, if no	ecessary. See ins	tructions						
Total (
			and on Part I, line 1						
			Net Investment I						ction 4968)
		(a) Name	(b) EIN	(c) Gross investment income (See instructions.)	(d) Capital gain net income		· ·		(f) Net investment income (See instructions.)
1	Filing Organization								
2	Related Organization								
3	Related								

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

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5

6

7

Organization Related Organization

Total from attachment, if necessary . . .

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- ' ' '		- 3
Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and st knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all any knowledge. Open	
	Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person May the IRS discuss this return with the preparer shown below? (see instructions)	Date No
Paid Preparer	Print/Type preparer's name Preparer's signature Date	PTIN PTIN P00353001 Pirm's EIN 92-0460586 P10353001 P10353001
Jse Only	Firm's address 4300 E CAMELBACK ROAD STE 475	Phone no. 412-355-600

ANNA STINSON TRUST 01-6057075

FORM 4720 - SCHEDULE B - INITIAL TAX ON UNDISTRIBUTED INCOME ______ NO CORRECTIVE ACTION TAKEN _____

NO CORRECTIVE ACTION MADE EXPLANATION: SEE ATTACHED