

Form **5227**

Department of the Treasury
Internal Revenue Service

Split-Interest Trust Information Return

See separate instructions.

Go to www.irs.gov/5227 for instructions and the latest information..

Do not enter social security numbers on this form (except on Schedule A) as it may be made public.

For the calendar year 2024 or tax year beginning , 2024, and ending , 20

OMB No. 1545-0196

2024

**pen to Public
Inspection**



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For the calendar year 2024 or tax year beginning _____, 2024, and ending _____, 20____

OMB No. 1545-0196

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**Open to Public
Inspection**

A Full name of trust				B Employer identification number	
Name of trustee				C Type of Entity (1) <input type="checkbox"/> Charitable lead trust (2) <input type="checkbox"/> Charitable remainder annuity trust described in section 664(d)(1) (3) <input type="checkbox"/> Charitable remainder unitrust described in section 664(d)(2) (4) <input type="checkbox"/> Pooled income fund described in section 642(c)(5) (5) <input type="checkbox"/> Other—Attach explanation	
Number, street, and room or suite no. (If a P.O. box, see the instructions.)					
City or town, state or province, country, and ZIP or foreign postal code					
D Fair market value (FMV) of assets at end of tax year		E Gross Income			
F Check applicable boxes (see instructions)		<input type="checkbox"/> Initial return	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return incl. amended K-1s, if nec.	G Date the trust was created
		<input type="checkbox"/> Change in trustee's	<input type="checkbox"/> Name	<input type="checkbox"/> Address	

Part I			Income and Deductions (All trusts complete Sections A through D)	
Section A—Ordinary Income				
1	Interest income		1	
2a	Ordinary dividends (including qualified dividends)		2a	
b	Qualified dividends (see instructions)	2b		
3	Business income or (loss). Attach Schedule C (Form 1040)		3	
4	Rents, royalties, partnerships, other estates and trusts, etc. Attach Schedule E (Form 1040)		4	
5	Farm income or (loss). Attach Schedule F (Form 1040)		5	
6	Ordinary gain or (loss). Attach Form 4797		6	
7	Other income. List type and amount _____		7	
8	Total ordinary income. Combine lines 1, 2a, and 3 through 7		8	
Section B—Capital Gains (Losses)				
9	Total short-term capital gain or (loss). Attach Schedule D, Part I (Form 1041)		9	
10	Total long-term capital gain or (loss). Attach Schedule D, Part II (Form 1041)		10	
11	Unrecaptured section 1250 gain	11		
12	28% gain	12		
13	Total capital gains (losses). Combine lines 9 and 10		13	
Section C—Nontaxable Income				
14	Tax-exempt interest		14	
15	Other nontaxable income. List type and amount _____		15	
16	Total nontaxable income. Add lines 14 and 15		16	

Section D – Deductions			
17	Interest	17	
18	Taxes (see the instructions)	18	
19	Trustee fees	19	
20	Attorney, accountant, and return preparer fees	20	
21	Other allowable deductions. Attach statement (see the instructions)	21	
22	Total. Add lines 17 through 21	22	
23	Charitable deduction	23	
Section E – Deductions Allocable to Income Categories (Section 664 trust only)			
24a	Enter the amount from line 22 allocable to ordinary income	24a	
b	Subtract line 24a from line 8	24b	
25a	Enter the amount from line 22 allocable to capital gains (losses)	25a	
b	Subtract line 25a from line 13	25b	
26a	Enter the amount from line 22 allocable to nontaxable income	26a	
b	Subtract line 26a from line 16	26b	

Part II **Schedule of Distributable Income** (Section 664 trust only) (See instructions)

Accumulations		(a) Ordinary income		(b) Capital gains (losses)		(c) Nontaxable income	
Net Investment Income (NII) Classification		Excluded Income	Accumulated NII post 2012	Excluded Income	Accumulated NII post 2012	Excluded Income	Accumulated NII post 2012
1	Undistributed income from prior tax years . . .						
2	Current tax year net income (before distributions): • In column (a), enter the amount from Part I, line 24b • In column (b), enter the amount from Part I, line 25b • In column (c), enter the amount from Part I, line 26b						
3	Total distributable income. Add lines 1 and 2 .						

Part III **Distributions of Principal for Charitable Purposes**

Section A						
1	Principal distributed in prior tax years for charitable purposes				1	
2	Principal distributed during the current tax year for charitable purposes. Fill in the information for columns (A), (B), and (C) and enter the amount distributed on the space to the right. (see the instructions)					
	(A) Payee's name and address	(B) Date of distribution	(C) Charitable purpose and description of assets distributed			
a	_____		_____			
	_____		_____			
	_____		_____		2a	
b	_____		_____			
	_____		_____			
	_____		_____		2b	
c	_____		_____			
	_____		_____			
	_____		_____		2c	

3	Attachment total	3	
4	Total. Add lines 1 through 3	4	
Accumulated Income Set Aside and Income Distributions for Charitable Purposes			
Grantor type trusts complete only lines 7 through 9 (see instructions)			
Section B			
5a	Income set aside in prior tax years for which a deduction was claimed under section 642(c)	5a	
b	Enter the amount shown on Part I, line 23	5b	
6	Add lines 5a and 5b	6	
7	Distributions made during the tax year (see the instructions): • For income set aside in prior tax years for which a deduction was claimed under section 642(c), • For charitable purposes for which a charitable deduction was claimed under section 642(c) in the current tax year, or • For charitable purposes by a grantor type trust for which a charitable deduction was claimed under section 170 upon contribution to the trust Fill in the information for columns (A), (B), and (C) and enter the amount distributed on the line to the right.		
	(A) Payee's name and address	(B) Date of distribution	(C) Charitable purpose and description of assets distributed
a			
			7a
b			
			7b
c			
			7c
8	Attachment total	8	
9	Add lines 7a through 8	9	
10	Carryover. Subtract line 9 from line 6	10	

Part IV **Balance Sheet** (see instructions)

Assets			(a) Beginning-of-Year Book Value	(b) End-of-Year Book Value	(c) FMV (see the instructions)
1	Cash—non-interest-bearing	1			
2	Savings and temporary cash investments	2			
3a	Accounts receivable	3a			
b	Less: allowance for doubtful accounts	3b			
4	Receivables due from officers, directors, trustees, and other disqualified persons (attach statement)	4			
5a	Other notes and loans receivable	5a			
b	Less: allowance for doubtful accounts	5b			
6	Inventories for sale or use	6			
7	Prepaid expenses and deferred charges	7			
8a	Investments—U.S. and state government obligations (attach statement)	8a			
b	Investments—corporate stock (attach statement)	8b			
c	Investments—corporate bonds (attach statement)	8c			
9a	Investments—land, buildings, and equipment: basis (attach statement)	9a			
b	Less: accumulated depreciation	9b			

10	Investments—other (attach statement)		10			
11a	Land, buildings, and equipment: basis	11a				
b	Less: accumulated depreciation	11b				
12	Other assets. Describe		12			
13	Total assets. Add lines 1 through 12 (must equal line 23)		13			
Liabilities						
14	Accounts payable and accrued expenses		14			
15	Deferred revenue		15			
16	Loans from officers, directors, trustees, and other disqualified persons		16			
17	Mortgages and other notes payable (attach statement)		17			
18	Other liabilities. Describe		18			
19	Total liabilities. Add lines 14 through 18		19			
Net Assets						
20	Trust principal or corpus		20			
21a	Undistributed income		21a			
b	Undistributed capital gains		21b			
c	Undistributed nontaxable income		21c			
22	Total net assets. Add lines 20 through 21c		22			
23	Total liabilities and net assets. Add lines 19 and 22		23			

Part V Charitable Remainder Annuity Trust (CRAT) Information (to be completed **only** by a Section 664 CRAT)

1a	Enter the initial fair market value (FMV) of the property placed in the trust	1a	
b	Enter the total annual annuity amounts for all recipients	1b	

Part VI Charitable Remainder Unitrust (CRUT) Information (to be completed **only** by a Section 664 CRUT)
(See instructions)

1 Is the CRUT a net income charitable remainder unitrust (NICRUT) as described in Regulations section 1.664-3(a)(1)(i)(b)(1)? ☐ **Yes** ☐ **No**

2 Is the CRUT a net income with make-up charitable remainder unitrust (NIMCRUT) as described in Regulations section 1.664-3(a)(1)(i)(b)(2)? ☐ **Yes** ☐ **No**

3 Did the trust change its method of payment during the tax year? ☐ **Yes** ☐ **No**
If “Yes,” describe the triggering event including the date of the event and the old method of payment _____

4a	Enter the unitrust fixed percentage to be paid to the recipients	4a		%
b	Unitrust amount. Subtract Part IV, line 19, column (c), from Part IV, line 13, column (c), and multiply the result by the percentage on line 4a. Do not enter less than -0-	4b		
If the answer is “Yes” on line 1 or line 2, go to line 5a. Otherwise, skip lines 5a through 6b and enter the line 4b amount on line 7.				

5a	Trust's accounting income for 2024. Attach statement	5a	
If the answer is "Yes" on line 1, go to line 5b. If the answer is "Yes" on line 2, skip line 5b and go to line 6a.			
b	Enter the smaller of line 4b or line 5a here and on line 7. Skip lines 6a and 6b	5b	
6a	Total accumulated distribution deficiencies from previous years (see instructions)	6a	
b	Add lines 4b and 6a	6b	
If lines 6a and 6b are completed, enter the smaller of line 5a or line 6b on line 7.			
7	Required unitrust distribution for 2024	7	
8	Carryover of accumulated distribution deficiency (only for trusts that answered "Yes" on line 2). Subtract line 7 from line 6b	8	
9	If this is the final return, enter the initial FMV of all assets placed in trust by the donor	9	
10	Did the trustee change the method of determining the FMV of the assets? If "Yes," attach an explanation.		<input type="checkbox"/> Yes <input type="checkbox"/> No
11	Were any additional contributions received by the trust during 2024? If "Yes," be sure to complete all columns of line 2 in Schedule A, Part V.		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part VII Statements Regarding Activities (see instructions)

		Yes	No
1	Are the requirements of section 508(e) satisfied either:		
	• By the 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?	1	
2	Are you using this return only to report the income and assets of a segregated amount under section 4947(a)(2)(B)?	2	

Part VIII Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the “Yes” column (to the right), unless an exception applies.

- 1** Self-dealing (section 4941):
- a** During 2024, did the trust (either directly or indirectly):
- (1) Engage in the sale or exchange, or leasing of property with a disqualified person?
- (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
- (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
- (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
- (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)?
- (6) Agree to pay money or property to a government official? (**Exception.** Check “No” if the trust agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
- b** If any answer is “Yes” to lines 1a(1) through (6), did **any** of the acts fail to qualify under the exceptions described in Regulations sections 53.4941(d)-3 and 4, or in a current Notice regarding disaster assistance (see instructions)?
- c** Organizations relying on a current Notice regarding disaster assistance, check here ☐
- d** Did the trust engage in a prior year in any of the acts described in line 1a, other than excepted acts, that were not corrected before January 1, 2024?
- 2** Does section 4947(b)(3)(A) or (B) apply? (see instructions)
If “Yes,” check the “N/A” box in lines 3 and 4.
- 3a** Taxes on excess business holdings (section 4943): ☐ **N/A**
- b** Did the trust hold more than a 2% direct or indirect interest in any business enterprise at any time during 2024?
- c** If “Yes,” did the trust have excess business holdings in 2024 as a result of **(1)** any purchase by the trust 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?

	Yes	No
1a(1)		
1a(2)		
1a(3)		
1a(4)		
1a(5)		
1a(6)		
1b		
1d		
2		
3b		
3c		

Use Form 4720, Schedule C, to determine if the trust had excess business holdings in 2024.

- 4a** Taxes on investments that jeopardize charitable purposes (section 4944): ☐ **N/A**
- b** Did the trust invest during 2024 any amount in a manner that would jeopardize its charitable purpose? . . .
- c** Did the trust 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 January 1, 2024?
- 5** Taxes on taxable expenditures (section 4945) and political expenditures (section 4955):
- a** During 2024, did the trust pay or incur any amount to:
- (1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?
- (2)** Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?
- (3)** Provide a grant to an individual for travel, study, or other similar purposes?
- (4)** Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?
- (5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational, or for the prevention of cruelty to children or animals?
- b** If any answer is “Yes” to lines 5a(1) through (5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945, or in a current Notice regarding disaster assistance (see instructions)?
- c** Organizations relying on a current Notice regarding disaster assistance, check here ☐
- d** If the answer is “Yes” to line 5a(4), does the trust claim exemption from the tax because it maintained expenditure responsibility for the grant?
- If “Yes,” attach the statement required by Regulations section 53.4945-5(d).
- 6** Personal benefit contracts (section 170(f)(10)):
- a** Did the trust, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?
- b** Did the trust, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .
- If “Yes” to line 6b, file Form 8870 (see instructions).
- 7** **Section 664 trusts:** Did the trust have unrelated business taxable income during the year?
- If “Yes,” file Form 4720.

4b		
4c		
5a(1)		
5a(2)		
5a(3)		
5a(4)		
5a(5)		
5b		
5d		
6a		
6b		
7		

Part IX **Questionnaire for Charitable Lead Trusts, Pooled Income Funds, and Charitable Remainder Trusts**
(see instructions)

Section A—All Trusts

1	Check this box if any of the split-interest trust's income interests expired during 2024	<input type="checkbox"/>
2	Check this box if all of the split-interest trust's income interests expired before 2024	<input type="checkbox"/>

If line 2 is checked and this is **not** a final return, attach an explanation.

Section B—Charitable Lead Trusts

3	Does the governing instrument require income in excess of the required annuity or unitrust payments to be paid for charitable purposes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	Enter the amount of any excess income required to be paid for charitable purposes for 2024	4	
5	Enter the amount of annuity or unitrust payments required to be paid to charitable beneficiaries for 2024	5	

Section C—Pooled Income Funds

6	Enter the amount of contributions received during 2024	6	
7	Enter the amount required to be distributed for 2024 to satisfy the remainder interest	7	
8	Enter any amounts that were required to be distributed to the remainder beneficiary that remain undistributed	8	
9	Enter the amount of income required to be paid to the charitable remainder beneficiary for 2024	9	

Section D—Charitable Remainder Trusts

10

Check this box if you are filing for a charitable remainder annuity trust or a charitable remainder unitrust whose charitable interests involve only cemeteries or war veterans’ posts

☐

11

Check this box if you are making an election under Regulations section 1.664-2(a)(1)(i)(a)(2) or 1.664-3(a)(1)(i)(g)(2) to treat income generated from certain property distributions (other than cash) by the trust as occurring on the last day of the tax year. (see instructions)

☐

12

Are you making an election under Regulations section 1.1411-10(g) with respect to a controlled foreign corporation or a qualified electing fund? (see instructions)

☐ Yes

☐ No

13

Is this the initial return? If “Yes,” attach a copy of the trust instrument

☐ Yes

☐ No

14

Was the trust instrument amended during the year? If “Yes,” attach a copy

☐ Yes

☐ No

15a

If this is the final return, were final distributions made according to the trust instrument?

☐ Yes

☐ No

b

If “Yes,” did you complete Part III, Section A, line 2?

☐ Yes

☐ No

c

If either line 15a or 15b is “No,” explain why _____

16

At any time during calendar year 2024, did the trust have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

☐ Yes

☐ No

See the instructions for exceptions and filing requirements for FinCEN Form 114.
If “Yes,” enter the name of the foreign country _____

Sign Here	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 trustee) is based on all information of which preparer has any knowledge.				
	Signature of trustee or officer representing trustee				Date
Paid Preparer Use Only	Preparer’s name	Preparer’s signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm’s name			Firm’s EIN	
	Firm’s address			Phone no.	

Full name of trust	Employer identification number
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NOT Open To Public Inspection

Schedule A—Distributions, Assets, and Donor Information

Part I Accumulation Schedule (Section 664 trust only) (see instructions)

Accumulations		(a) Ordinary income		(b) Capital gain (loss)		(c) Nontaxable income	
Net Investment Income (NII) Classification		Excluded Income	Accumulated NII	Excluded Income	Accumulated NII	Excluded Income	Accumulated NII
1	Total distributable income. Enter the amount from Part II, line 3						
2a	Total distributions for 2024: _____						
b	2024 distributions from income						
3	Undistributed income at end of tax year. Subtract line 2b from line 1						

Part II Simplified Net Investment Income Calculation

	(a) Accumulated NII	(b) Current Year NII	(c) Distributions	(d) Ending NII
1				

Part III Current Distributions Schedule (Section 664 trust only) (see instructions)							
	(a) Name of recipient			(b) Identifying number		(c) Percentage of total unitrust amount payable (if applicable)	
1a						%	
b						%	
		(d) Ordinary Income	Capital gains		(g) Nontaxable income	(h) Corpus	(i) Add cols. (d) through (h)
			(e) Short-term	(f) Long-term			(j) Net investment income
1a							
b							
2	Attachment total . . .						
3	Total						
4	If line 3, Total, column (i) does not agree with Part V, line 1b of Form 5227 for a CRAT or Part VI, line 7 of Form 5227 for a CRUT, check here <input type="checkbox"/> and attach an explanation.						
Part IV Current Distributions (charitable lead trusts or pooled income funds only) (see instructions)							
1	Enter the amount required to be paid to private beneficiaries for 2024						

Part V

Assets and Donor Information (Section 664 trust or charitable lead trust only)

1

Is this the initial return or were additional assets contributed to the trust in 2024?

☐ Yes
☐ No

If “Yes,” complete the schedule below.

If “No,” complete only column (a) of the schedule below.

	(a) Name and address of donor	(b) Description of each asset donated	(c) FMV of each asset on date of donation	(d) Date of donation
2a				
2b				
2c				

3

Attachment total

4

Total

5

For charitable remainder trusts: If this was the final year, was an early termination agreement signed by all parties to the trust?

☐ Yes
☐ No
☐ N/A

If “Yes,” attach a copy of the signed agreement.