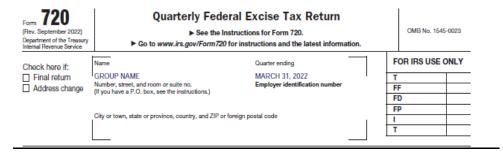
FORM 720

https://www.irs.gov./pub/irs-pdf/f720.pdf

Top Section:

• Fill out your company name, address, quarter ending, and EIN



Part II:

IRS No. 133 (part c or d)

- Use c if your plan year ended before October 1, 2021
- Use d if your plan year ended after October 1, 2021
- Fill in avg. number of lives covered column (this number can be calculated by dividing your 4-quarter lives count by 4 which HMA provided in your letter), Fee and Tax

Here are the enrollment numbers for your group from January 2021 through June 2022 for your Lifestyle Health Policy.

2021 - Q1	2021 - Q2	2021 - Q3	2021 - Q4	2022 - Q1	2022 - Q2
16	19	18	18	7	0

• Enter your tax amount on line #2: Total

1	Total. Add all amounts in Part I. Complete Schedule A unless one-time filing								
Part II									
IRS No.	Patient-Centered Outcomes Research Fee (see instructions)	(a) Avg. number of lives covered (see inst.)	(b) Rate for avg. covered life	(c) Fee (see instructions)		Tax	IRS No.		
	Specified health insurance policies								
	(a) With a policy year ending before October 1, 2021		\$2.66		١.				
	(b) With a policy year ending on or after October 1, 2021,				11				
	and before October 1, 2022		\$2.79		}				
	Applicable self-insured health plans					43.25	133		
	(c) With a plan year ending before October 1, 2021		\$2.66						
	(d) With a plan year ending on or after October 1, 2021,								
	and before October 1, 2022	15.5	\$2.79	43.25)		1		

Part III

Line 3 & line 10

• Enter the tax amount.

Sign Here

• Sign and date, then complete the payment voucher.

Payment Voucher

- 1. Enter EIN
- 2. Carry your tax amount down (You will need to write a check for this amount made payable to the **United States Treasury**)
- 3. Mark the Quarter your plan ended
- 4. Enter your company name and address