

## Nursing Facility Cost Report (SNF-CR)

### Schedule 12.4: Related Party Transactions

#### Instructions

In the tab titled **Related Party Transactions**, list any entity, person or related party as defined in 101 CMR 206.00 that (a) provides services, facilities, goods and/or supplies to this facility; or (b) receives any salary, fee or other compensation from this facility. Provide the amount paid by this facility for this reporting year. (Attach addendum if necessary.)

Upload the completed excel template by clicking **Upload File**.

[illegible]