FILER'S name, street address, city, state, ZIP code, and telephone number Illinois Institute of Technology 3424 S. State Street Tech Central - 4TH Floor Chicago IL 60616 Contact: (312) 567-3794 ECSI: 866-428-1098	1 Payments received for qualified tuition and related expenses 2 Amounts billed for qualified tuition and related expenses $20,056.00	OMB No. 1545-1574 **2013** Form **1098-T**	**Tuition Statement**
FILER'S federal identification no. 36-2170136 STUDENT'S social security number *****0118	3 If this box is checked, your educational institution has changed its reporting method for 2013 [ ]		**Copy B** **For Student**
STUDENT'S name, street address, city, state, and ZIP code COLIN R REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148-1522	4 Adjustments made for a prior year	5 Scholarships or grants $12,000.00	This is important tax information and is being furnished to the Internal Revenue Service.
	6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2014 [ ]	
Service Provider/Acct No. (see instr.) A20246361 8 Checked if at least half-time student [X]	9 Checked if a graduate student [ ]	10 Ins. contract reimb./refund	

Form **1098-T** (keep for your records) Department of the Treasury-Internal Revenue Service

Please Note: If your SSN is incorrect or missing on this form, you did not provide it to your institution. To request that your SSN be corrected, download the W-9S form at http://www.ecsi.net/taxSelect/w9s.pdf and follow the instructions. The American Opportunity Tax Credit ("AOTC") applied to tax years 2009 and 2010 under American Recovery and Reinvestment Act ("ARRA"). The credit was extended to apply for tax years 2011 and 2012 by the Tax Relief and Job Creation Act of 2010. The American Taxpayer Relief Act of 2012 extended the AOTC for five years through December 2017. Please visit http://www.ecsi.net/taxinfo.html

Transaction History

8/19/2013	Box 2	Activity Fee	$110.00
8/19/2013	Box 2	New Student Fee	$300.00
8/19/2013	Box 2	Student Service Fee	$390.00
8/19/2013	Box 2	Undergraduate Tuition	$19,256.00
8/19/2013	Box 5	IIT UG Scholarship	$2,000.00
8/19/2013	Box 5	Stem Scholarship	$2,750.00
8/19/2013	Box 5	Transfer Scholarship	$7,250.00

Transaction History

View on the Web at www.ecsi.net/1098t
School Code: 7G **Acct#:** Your SSN **Pin#:** 50170

See Other Side For Opening Instructions

Illinois Institute of Technology
Heartland ECSI TaxSelect
P.O. Box 15760
PITTSBURGH, PA 15244

MAILED FROM ZIP CODE 15290

PRESORTED
FIRST-CLASS MAIL
U.S. POSTAGE PAID
EDUCATIONAL COMPUTER SYSTEMS INC.

IMPORTANT: Tax Information Enclosed - 1098-T

SC#7G T-162 - 224 002724739
COLIN R REDMOND
315 N BROADVIEW AVE
LOMBARD IL 60148-1522

P.O. BOX 1231
BRANDON FL 33509 - 1231

012727

RANDALL D REDMOND
SUSAN S REDMOND
315 N BROADVIEW AVE
LOMBARD IL 60148 - 1522

STAR 00162727

☐ CORRECTED (If Checked)

RECIPIENT'S/LENDER'S name, address, and telephone number HOUSEHOLD FINANCE CORPORATION II P.O. BOX 1231 BRANDON FL 33509 - 1231 800-365-0175	* Caution: *The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.*	OMB No. 1545-0901 **2013** Form **1098**	**Mortgage Interest Statement**
RECIPIENT'S Federal Identification no. 36-3323014 / PAYER'S social security number 348608235	1 Mortgage interest received from payer(s)/borrower(s)* $10,302.22		**Copy B** **For Payer/Borrower**
PAYER'S/BORROWER'S name RANDALL D REDMOND SUSAN S REDMOND	2 Points paid on purchase of principal residence $0.00		The information in boxes 1, 2, 3, and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.
Street address (including apt. no.) 315 N BROADVIEW AVE	3 Refund of overpaid interest $0.00		
City, state, and zip code LOMBARD IL 60148 - 1522	4 Mortgage insurance premiums		
Account number(see instructions) 0019340207	5		

Form **1098** **(Keep for your records.)** **www.irs.gov/form1098** Department of the Treasury - Internal Revenue Service

**

Instructions for Payer/Borrower

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or business and, in the course of such trade or business, received from you at least $600 of mortgage interest (including certain points) on any one mortgage in the calendar year must furnish this statement to you.

If you received this statement as the payer of record on a mortgage on which there are other borrowers, furnish each of the other borrowers with information about the proper distribution of amounts reported on this form. Each borrower is entitled to deduct only the amount he or she paid and points paid by the seller that represent his or her share of the amount allowable as a deduction. Each borrower may have to include in income a share of any amount reported in box 3.

If your mortgage payments were subsidized by a government agency, you may not be able to deduct the amount of the subsidy. See the instructions for Form 1040, Schedule A, C, or E for how to report the mortgage interest. Also, for more information, see Pub. 936 and Pub. 535.

Payer's/Borrower's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number(ATIN). However, the issuer has reported your complete identification number to the IRS, and, where applicable, to state and/or local governments.

Account number. May show an account or other unique number the lender has assigned to distinguish your account.

Box 1. Shows the mortgage interest received by the recipient/lender during the year. This amount includes interest on any obligation secured by real property, including a home equity, line of credit, or credit card loan. This amount does not include points, government subsidy payments, or seller payments on a "buydown" mortgage. Such amounts are deductible by you only in certain circumstances. **Caution:** *If you prepaid interest in 2013 that accrued in full by January 15, 2014, this prepaid interest may be included in box 1. However, you cannot deduct the prepaid amount in 2013 even though it may be included in box 1.* If you hold a mortgage credit certificate and can claim the mortgage interest credit, see Form 8396. If the interest was paid on a mortgage, home equity, line of credit, or credit card loan secured by your personal residence, you may be subject to a deduction limitation.

Box 2. Not all points are reportable to you. Box 2 shows points you or the seller paid this year for the purchase of your principal residence that are required to be reported to you. Generally, these points are fully deductible in the year paid, but you must subtract seller-paid points from the basis of your residence. Other points not reported in box 2 may also be deductible. See Pub. 936 to figure the amount you can deduct.

Box 3. Do not deduct this amount. It is a refund (or credit) for overpayment(s) of interest you made in a prior year or years. If you itemized deductions in the year(s) you paid the interest, you may have to include part or all of the box 3 amount on the "Other income" line of your 2013 Form 1040. No adjustment to your prior year(s) tax return(s) is necessary. For more information, see Pub. 936 and *Itemized Deduction Recoveries* in Pub. 525.

Box 4. Shows mortgage insurance premiums which may qualify to be treated as deductible mortgage interest. See the Schedule A (Form 1040) instructions.

Box 5. The interest recipient may use this box to give you other information, such as the address of the property that secures the debt, real estate taxes, or insurance paid from escrow.

Future developments. For the latest information about developments related to Form 1098 and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/form1098*.

PNCBANK, NATIONAL ASSOCIATION 00901857

PO BOX 535230 00001

PITTSBURGH, PA 15253-5230

For Inquiries Please Call
1-888-762-1099

E.I.N. 22-1146430

021857

SUSAN S REDMOND 71
315 N BROADVIEW AVE
LOMBARD IL 60148-1522

Calendar Year
2013

Taxpayer ID
XXX-XX-5867

THIS STATEMENT IS A FORM 1098 OMB NO. 1545-0901, OR A FORM 1098-E OMB NO. 1545-1576, OR 1099-A OMB NO. 1545-0877 OR 1099-B OMB NO. 1545-0715 OR 1099-C OMB NO. 1545-1424, OR 1099-DIV OMB NO. 1545-0110 OR 1099-INT OMB NO. 1545-0112 OR 1099-MISC OMB NO. 1545-0115 OR 1099-OID OMB NO. 1545-0117 U.S. INFORMATION RETURN

2013 - 1099-INT, INTEREST INCOME

	ACCOUNT NUMBER		BOX 1 INTEREST
INTEREST CHK	0071 46-4474-5559		.18
BOX 1	INTEREST INCOME	.18	
INTEREST CHK	0071 46-4474-5567		.04
BOX 1	INTEREST INCOME	.04	
STATEMENT SVG	0071 464-4745575		10.63
BOX 1	INTEREST INCOME	10.63	
TOTAL INTEREST		10.85	

THIS INFORMATION IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE.IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THE IRS DETERMINES THAT AN UNDERPAYMENT OF TAX RESULTS BECAUSE YOU OVERSTATED A DEDUCTION OR DID NOT REPORT CORRECT AMOUNTS.

* FORM 1098 CAUTION: THE AMOUNT SHOWN MAY NOT BE FULLY DEDUCTIBLE BY YOU. LIMITS BASED ON THE LOAN AMOUNT AND THE COST AND VALUE OF THE SECURED PROPERTY MAY APPLY. ALSO, YOU MAY ONLY DEDUCT INTEREST TO THE EXTENT IT WAS INCURRED BY YOU, ACTUALLY PAID BY YOU, AND NOT REIMBURSED BY ANOTHER PERSON.

* FORM 1099-OID: THIS MAY NOT BE THE CORRECT FIGURE TO REPORT ON YOUR INCOME TAX RETURN.

PLEASE REFER TO THE INSTRUCTIONS ON THE BACK OF THIS STATEMENT.

COPY B FOR PAYER, RECIPIENT, BORROWER, OR DEBTOR

XRB-O1IRSFMF 1098 1099 A/B/C/D/I/M/O REV (11-09)

Form W-2 Wage and Tax Statement 2013

c Employer's name, address, and ZIP code	UNITED HEALTHCARE SERVICES INC ATTN--OPERATIONS MN082-B300 PO BOX 1459 MINNEAPOLIS MN 55440-1459
e Employee's name, address, and ZIP code	RANDALL D REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148
7 Social security tips	
8 Allocated tips	
9	
10 Dependent care benefits	
13 Statutory employee / Retirement plan / Third-party sick pay	Retirement plan: X
b Employer identification number (EIN)	41-1289245
a Employee's social security number	348-60-8235
1 Wages, tips, other compensation	65297.62
2 Federal income tax withheld	7158.65
3 Social security wages	69526.54
4 Social security tax withheld	4310.65
5 Medicare wages and tips	69526.54
6 Medicare tax withheld	1008.13
11 Nonqualified plans	
12a See instructions for box 12	C 193.18
12b	D 4228.92
12c	DD 12990.21
12d	
14 Other	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	411289245	65297.62	2951.31			

Copy B-To Be Filed With Employee's FEDERAL Tax Return

This information is being furnished to the Internal Revenue Service. OMB No. 1545-0008

Dept. of the Treasury - IRS Visit the IRS website at *www.irs.gov/efile.*

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Form W-2 Wage and Tax Statement 2013

c Employer's name, address, and ZIP code	UNITED HEALTHCARE SERVICES INC ATTN--OPERATIONS MN082-B300 PO BOX 1459 MINNEAPOLIS MN 55440-1459
e Employee's name, address, and ZIP code	RANDALL D REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148
7 Social security tips	
8 Allocated tips	
9	
10 Dependent care benefits	
13 Statutory employee / Retirement plan / Third-party sick pay	Retirement plan: X
b Employer identification number (EIN)	41-1289245
a Employee's social security number	348-60-8235
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2 Federal income tax withheld	7158.65
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6 Medicare tax withheld	1008.13
11 Nonqualified plans	
12a See instructions for box 12	C 193.18
12b	D 4228.92
12c	DD 12990.21
12d	
14 Other	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	411289245	65297.62	2951.31			

Copy C-For EMPLOYEE'S RECORDS (See *Notice to Employee* on the back of Copy B.) OMB No. 1545-0008

Dept. of the Treasury - IRS Visit the IRS website at *www.irs.gov/efile.*

Form W-2 Wage and Tax Statement 2013

c Employer's name, address, and ZIP code	UNITED HEALTHCARE SERVICES INC ATTN--OPERATIONS MN082-B300 PO BOX 1459 MINNEAPOLIS MN 55440-1459
e Employee's name, address, and ZIP code	RANDALL D REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148
7 Social security tips	
8 Allocated tips	
9	
10 Dependent care benefits	
13 Statutory employee / Retirement plan / Third-party sick pay	Retirement plan: X
b Employer identification number (EIN)	41-1289245
a Employee's social security number	348-60-8235
1 Wages, tips, other compensation	65297.62
2 Federal income tax withheld	7158.65
3 Social security wages	69526.54
4 Social security tax withheld	4310.65
5 Medicare wages and tips	69526.54
6 Medicare tax withheld	1008.13
11 Nonqualified plans	
12a	C 193.18
12b	D 4228.92
12c	DD 12990.21
12d	
14 Other	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	411289245	65297.62	2951.31			

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**

Form W-2 Wage and Tax Statement 2013

c Employer's name, address, and ZIP code	UNITED HEALTHCARE SERVICES INC ATTN--OPERATIONS MN082-B300 PO BOX 1459 MINNEAPOLIS MN 55440-1459
e Employee's name, address, and ZIP code	RANDALL D REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148
7 Social security tips	
8 Allocated tips	
9	
10 Dependent care benefits	
13 Statutory employee / Retirement plan / Third-party sick pay	Retirement plan: X
b Employer identification number (EIN)	41-1289245
a Employee's social security number	348-60-8235
1 Wages, tips, other compensation	65297.62
2 Federal income tax withheld	7158.65
3 Social security wages	69526.54
4 Social security tax withheld	4310.65
5 Medicare wages and tips	69526.54
6 Medicare tax withheld	1008.13
11 Nonqualified plans	
12a	C 193.18
12b	D 4228.92
12c	DD 12990.21
12d	
14 Other	

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	411289245	65297.62	2951.31			

Copy 2-To Be Filed With Employee's State, City, or Local Income Tax Return OMB No. 1545-0008 **Dept. of the Treasury - IRS**

FORM # LW28700

Faith Baptist Church
Donor Contribution Summary
January through December 2013

Date	Name	Class	Amount
Susan Redmond			
3/31/2013	Susan Redmond	General Fund	100.00-
Total Susan Redmond			100.00-

	a Employee's social security no. 354-58-5867	**Copy B--To Be Filed With Employee's FEDERAL Tax Return.** OMB No. 1545-0008

b Employer identification number (EIN) 27-2775687	1 Wages, tips, other comp. 10926.00	2 Federal income tax withheld 132.96
c Employer's name, address, and ZIP code DATO PISTORIO FINANCIAL GROUP 425 W ROOSEVELT RD WHEATON IL 60187-5077	3 Social security wages 10926.00	4 Social security tax withheld 677.42
	5 Medicare wages and tips 10926.00	6 Medicare tax withheld 158.43
	7 Social security tips	8 Allocated tips
d Control number 10	9	10 Dependent care benefits
e Employee's name, address, and ZIP code SUSAN S REDMOND 315 N BROADVIEW AVE LOMBARD IL 60148-1522	11 Nonqualified plans	Code 12a See instructions for box 12
	13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	Code 12b
	14 Other	Code 12c
		Code 12d

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
IL	27-2775687-000	10926.00	461.46			

Form **W-2** **Wage and Tax Statement** **2013** 38-2099803 Department of the Treasury -- Internal Revenue Service