3737	UVOID CORRE	CTED			
	YER'S/TRUSTEE'S name, street address, city or town, state or province, untry, ZIP or foreign postal code, and telephone no.		OMB No. 1545-1760 Form 1099-Q (Rev. April 2025) For calendar year		Payments From Qualified Education Programs (Under Sections 529 and 530)
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis	4 Type of transfer: a Trustee-to-ti	rustee	Copy A For
RECIPIENT'S name		\$ 5 Distribution is from: a Private QTP	b QTP to Roth 6 Check if the recipien not the designated beneficiary		Internal Revenue Service Center For filing information,
Street address (including apt. no.)		b State QTP c Coverdell ESA	,		Privacy Act, and Paperwork Reduction Act Notice, see the
City or town, state or province, count Account number (see instructions)	ry, and ZIP or foreign postal code				General Instructions for Certain Information Returns.
					www.irs.gov/Form1099
Form 1000-0 (Poy 4 2025)	Cat No. 20002 I	value iro gov/Form10000	Department of the T	rocount	Internal Davanua Carrias

Form 1099-Q (Rev. 4-2025)

Cat. No. 32223J

www.irs.gov/Form1099Q

Department of the Treasury - Internal Revenue Service

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8383	U VOID CORRE	ECTED		
FILER'S name, street address, city or to foreign postal code, and telephone num		1 Payments received for qualified tuition and related expenses 2	OMB No. 1545-1574	Tuition Statement
			Form 1098-T	
FILER'S employer identification no.	STUDENT'S TIN	3		Copy A For
STUDENT'S name		4 Adjustments made for a prior year	5 Scholarships or grants	Internal Revenue Service Center
		\$	\$	For filing information,
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an	Privacy Act, and Paperwork Reduction Act Notice, see the
City or town, state or province, country	and ZIP or foreign postal code	\$	academic period beginning January- March 2026	General Instructions for Certain
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student	9 Checked if a graduate student	10 Ins. contract reimb./refund	Information Returns. www.irs.gov/Form1099
4000 T				

Form 1098-T Cat. No. 25087J www.irs.gov/Form1098T Department of the Treasury - Internal Revenue Service

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8181	☐ VOID ☐ CORRI	ECTED	014514 4545 4000	
RECIPIENT'S/LENDER'S name, stree province, country, ZIP or foreign post			OMB No. 1545-1380 Form 1098	Mortgage
			(Rev. April 2025)	Interes
			For calendar year	Statemen
		1 Mortgage interest received	d from payer(s)/borrower(s)	Copy A
RECIPIENT'S/LENDER'S TIN	PIENT'S/LENDER'S TIN PAYER'S/BORROWER'S TIN		3 Mortgage origination date	Internal Revenue Service Center
		4 Refund of overpaid interest	5 Mortgage insurance premiums	For filing information
PAYER'S/BORROWER'S name	YER'S/BORROWER'S name		\$	Privacy Act
		6 Points paid on purchase o	f principal residence	and Paperwork Reduction Ac Notice, see the
Street address (including apt. no.)		7 If address of property as PAYER'S/BORROWER'S the address or description in	Genera Instructions fo Certain Information Returns www.irs.gov/Form1098	
City or town, state or province, count	ry, and ZIP or foreign postal code	8 Address or description of instructions)		
9 Number of properties securing the mortgage	10 Other			
Account number (see instructions)				11 Mortgage acquisition date
Form 1098 (Rev. 4-2025) Do Not Cut or Separa	Cat. No. 14402K te Forms on This Pag	www.irs.gov/Form109 e — Do Not Cu		

7171 UVOID		CTE	D							
PAYER'S name, street address, city or town, state or pro- or foreign postal code, and telephone no.	vince, country, ZIP	1a T	Total o	ordina	ry divider	nds	OME	3 No. 1545-0	110	
		\$					Form	1099-E	VIC	Dividends and
		1b (Qualific	ed div	/idends		(Rev	v. January 20	024)	Distributions
							Fo	r calendar ye	ear	
		\$								1
			Total c	apital	I gain dis	tr.		Unrecap. Sed	c. 1250 gain	Copy A
		\$	0	- 100	0!		\$	0-11	(000()!	For Internal Revenue
PAYER'S TIN RECIPIENT'S TIN		2C S	Sectio	n 120	2 gain		\$	Collectibles ((28%) gain	Service Center
		2e S	Section	897 or	dinary divi	idends	<u> </u>	Section 897 c	capital gain	+
		\$					\$			File with Form 1096.
RECIPIENT'S name		3 Nondividend distribution		itions	4	Federal incom	ne tax withheld			
		\$					\$			For Privacy Act and Paperwork
		5 8			Reduction Act					
Street address (including apt. no.)		\$		<u>.</u>			\$			Notice, see the
		7 F	Foreigr	n tax ¡	paid		8	-oreign country o	or U.S. possession	current General
City or town, state or province, country, and ZIP or foreign	n postal code	\$								Instructions for Certain
		<u> </u>	Cash lic	quidati	ion distrib	outions	10	Noncash liquida	ation distributions	-
		\$					\$			Returns.
	11 FATCA filing requirement	12 E	Exemp	ot-inte	rest divid	dends		Specified privipond interest		
		\$					\$			
Account number (see instructions)	2nd TIN not.	14 5	State	15 8	State identific	cation no.	16	State tax with	hheld	1
		L					\$]
							\$			

Form **1099-DIV** (Rev. 1-2024) Form 1099-DIV (Rev. 1-2024)

Cat. No. 14415N

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Department of the Treasury - Internal Revenue Service

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			ECTED		U VOID	9292		
	OMB No. 1545-0112	OM	Payer's RTN (optional)	, country, ZIP	vn, state or province,	PAYER'S name, street address, city or or foreign postal code, and telephone r		
Interest	orm 1099-INT	Forr				,		
Income	(Rev. January 2024)	(Re	1 Interest income					
	For calendar year	Fo	\$					
Сору А			2 Early withdrawal penalty					
			\$		CIPIENT'S TIN	PAYER'S TIN		
For Internal Revenue Service Center	d Treasury obligations	ds and T	3 Interest on U.S. Savings Bon					
			\$		FOIDIENT/O nome			
File with Form 1096.	estment expenses	5 Invest	4 Federal income tax withheld \$	RECIPIENT'S name				
For Privacy Act and Paperwork	eign country or U.S. territory	7 Foreign	6 Foreign tax paid					
		\$			Street address (including apt. no.)			
Reduction Act Notice, see the	ecified private activity bond erest	9 Speci- intere	8 Tax-exempt interest					
current General		\$	\$	tal code	nd ZIP or foreign pos	City or town, state or province, country		
Instructions for Certain	and premium	11 Bond	10 Market discount					
Information		\$	117	FATCA filing				
Returns.	nd premium on tax-exempt bond	13 Bond p	12 Bond premium on Treasury obligations \$	requirement				
17 State tax withheld	te 16 State identification no.	15 State	14 Tax-exempt and tax credit bond CUSIP no.	2nd TIN not.		Account number (see instructions)		
Internal Revenue Service	partment of the Treasury -	Denar	www.irs.gov/Form1099INT		Cat No. 14410K	Form 1099-INT (Rev. 1-2024)		

Form 1099-INT (Rev. 1-2024)

Cat. No. 14410K

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22225 AOID [a Er	mployee's social security number	For Official Use Only OMB No. 1545-0029								
b Employer identification number	er (EIN)				1 Wages, tips, other compensation 2 Federal income tax withhe						
c Employer's name, address, a	nd ZIP co	ode			3 Social security wages 4 Social security tax withh				x withheld		
					5 Med	dicare wages and tips	6 Medio	care tax with	held		
					7 Social security tips 8 Allocated tips						
d Control number					9 10 Dependent care benef			penefits			
e Employee's first name and in	tial	Last name	Suff.			nqualified plans	12a See instructions for box 12				
					13 Statutory employee Retirement Third-party sick pay						
					14 Oth	er	12c				
							12d				
f Employee's address and ZIP	ode										
15 State Employer's state ID nu	mber	16 State wages, tips, etc.	17 State	e incom	ie tax	18 Local wages, tips, etc.	19 Local inc	ome tax	20 Locality name		

Form **W-2** Wage and Tax Statement



Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction
Act Notice, see the separate instructions.

Copy A—For Social Security Administration. Send this entire page with Form W-3 to the Social Security Administration; photocopies are **not** acceptable.

Cat. No. 10134D

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8383	U VOID CORRE	ECTED		
FILER'S name, street address, city or to foreign postal code, and telephone num		1 Payments received for qualified tuition and related expenses 2	OMB No. 1545-1574	Tuition Statement
			Form 1098-T	
FILER'S employer identification no.	STUDENT'S TIN	3		Copy A For
STUDENT'S name		4 Adjustments made for a prior year	5 Scholarships or grants	Internal Revenue Service Center
		\$	\$	For filing information,
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an	Privacy Act, and Paperwork Reduction Act Notice, see the
City or town, state or province, country	and ZIP or foreign postal code	\$	academic period beginning January- March 2026	General Instructions for Certain
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student	9 Checked if a graduate student	10 Ins. contract reimb./refund	Information Returns. www.irs.gov/Form1099
4000 T				

Form 1098-T Cat. No. 25087J www.irs.gov/Form1098T Department of the Treasury - Internal Revenue Service

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3737	UVOID CORRE	CTED			
	YER'S/TRUSTEE'S name, street address, city or town, state or province, untry, ZIP or foreign postal code, and telephone no.		OMB No. 1545-1760 Form 1099-Q (Rev. April 2025) For calendar year		Payments From Qualified Education Programs (Under Sections 529 and 530)
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis	4 Type of transfer: a Trustee-to-ti	rustee	Copy A For
RECIPIENT'S name		\$ 5 Distribution is from: a Private QTP	b QTP to Roth 6 Check if the recipien not the designated beneficiary		Internal Revenue Service Center For filing information,
Street address (including apt. no.)		b State QTP c Coverdell ESA	,		Privacy Act, and Paperwork Reduction Act Notice, see the
City or town, state or province, count Account number (see instructions)	ry, and ZIP or foreign postal code				General Instructions for Certain Information Returns.
					www.irs.gov/Form1099
Form 1000-0 (Poy 4 2025)	Cat No. 20002 I	value iro gov/Form10000	Department of the T	rocount	Internal Davanua Carrias

Form 1099-Q (Rev. 4-2025)

Cat. No. 32223J

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8181	☐ VOID ☐ CORRI	ECTED	014514 4545 4000	
RECIPIENT'S/LENDER'S name, stree province, country, ZIP or foreign post			OMB No. 1545-1380 Form 1098	Mortgage
			(Rev. April 2025)	Interes
			For calendar year	Statemen
		1 Mortgage interest received	d from payer(s)/borrower(s)	Copy A
RECIPIENT'S/LENDER'S TIN	PIENT'S/LENDER'S TIN PAYER'S/BORROWER'S TIN		3 Mortgage origination date	Internal Revenue Service Center
		4 Refund of overpaid interest	5 Mortgage insurance premiums	For filing information
PAYER'S/BORROWER'S name	YER'S/BORROWER'S name		\$	Privacy Act
		6 Points paid on purchase o	f principal residence	and Paperwork Reduction Ac Notice, see the
Street address (including apt. no.)		7 If address of property as PAYER'S/BORROWER'S the address or description in	Genera Instructions fo Certain Information Returns www.irs.gov/Form1098	
City or town, state or province, count	ry, and ZIP or foreign postal code	8 Address or description of instructions)		
9 Number of properties securing the mortgage	10 Other			
Account number (see instructions)				11 Mortgage acquisition date
Form 1098 (Rev. 4-2025) Do Not Cut or Separa	Cat. No. 14402K te Forms on This Pag	www.irs.gov/Form109 e — Do Not Cu		

7171 UVOID		CTE	D							
PAYER'S name, street address, city or town, state or pro- or foreign postal code, and telephone no.	vince, country, ZIP	1a T	Total o	ordina	ry divider	nds	OME	3 No. 1545-0	110	
		\$					Form	1099-E	VIC	Dividends and
		1b (Qualific	ed div	/idends		(Rev	v. January 20	024)	Distributions
							Fo	r calendar ye	ear	
		\$								1
			Total c	apital	I gain dis	tr.		Unrecap. Sed	c. 1250 gain	Copy A
		\$	0	- 100	0!		\$	0-11	(000()!	For Internal Revenue
PAYER'S TIN RECIPIENT'S TIN		2C S	Sectio	n 120	2 gain		\$	Collectibles ((28%) gain	Service Center
		2e S	Section	897 or	dinary divi	idends	<u> </u>	Section 897 c	capital gain	+
		\$					\$			File with Form 1096.
RECIPIENT'S name		3 Nondividend distribution		itions	4	Federal incom	ne tax withheld			
		\$					\$			For Privacy Act and Paperwork
		5 8			Reduction Act					
Street address (including apt. no.)		\$		<u>.</u>			\$			Notice, see the
		7 F	Foreigr	n tax ¡	paid		8	-oreign country o	or U.S. possession	current General
City or town, state or province, country, and ZIP or foreign	n postal code	\$								Instructions for Certain
		<u> </u>	Cash lic	quidati	ion distrib	outions	10	Noncash liquida	ation distributions	-
		\$					\$			Returns.
	11 FATCA filing requirement	12 E	Exemp	ot-inte	rest divid	dends		Specified privipond interest		
		\$					\$			
Account number (see instructions)	2nd TIN not.	14 5	State	15 8	State identific	cation no.	16	State tax with	hheld	1
		L					\$]
							\$			

Form **1099-DIV** (Rev. 1-2024) Form 1099-DIV (Rev. 1-2024)

Cat. No. 14415N

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Department of the Treasury - Internal Revenue Service

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			ECTED		U VOID	9292		
	OMB No. 1545-0112	OM	Payer's RTN (optional)	, country, ZIP	vn, state or province,	PAYER'S name, street address, city or or foreign postal code, and telephone r		
Interest	orm 1099-INT	Forr				,		
Income	(Rev. January 2024)	(Re	1 Interest income					
	For calendar year	Fo	\$					
Сору А			2 Early withdrawal penalty					
			\$		CIPIENT'S TIN	PAYER'S TIN		
For Internal Revenue Service Center	d Treasury obligations	ds and T	3 Interest on U.S. Savings Bon					
			\$		FOIDIENT/O nome			
File with Form 1096.	estment expenses	5 Invest	4 Federal income tax withheld \$	RECIPIENT'S name				
For Privacy Act and Paperwork	eign country or U.S. territory	7 Foreign	6 Foreign tax paid					
		\$			Street address (including apt. no.)			
Reduction Act Notice, see the	ecified private activity bond erest	9 Speci- intere	8 Tax-exempt interest					
current General		\$	\$	tal code	nd ZIP or foreign pos	City or town, state or province, country		
Instructions for Certain	and premium	11 Bond	10 Market discount					
Information		\$	117	FATCA filing				
Returns.	nd premium on tax-exempt bond	13 Bond p	12 Bond premium on Treasury obligations \$	requirement				
17 State tax withheld	te 16 State identification no.	15 State	14 Tax-exempt and tax credit bond CUSIP no.	2nd TIN not.		Account number (see instructions)		
Internal Revenue Service	partment of the Treasury -	Denar	www.irs.gov/Form1099INT		Cat No. 14410K	Form 1099-INT (Rev. 1-2024)		

Form 1099-INT (Rev. 1-2024)

Cat. No. 14410K

www.irs.gov/Form1099INT

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22225 AOID [a Er	mployee's social security number	For Official Use Only OMB No. 1545-0029								
b Employer identification number	er (EIN)				1 Wages, tips, other compensation 2 Federal income tax withhe						
c Employer's name, address, a	nd ZIP co	ode			3 Social security wages 4 Social security tax withh				x withheld		
					5 Med	dicare wages and tips	6 Medio	care tax with	held		
					7 Social security tips 8 Allocated tips						
d Control number					9 10 Dependent care benef			penefits			
e Employee's first name and in	tial	Last name	Suff.			nqualified plans	12a See instructions for box 12				
					13 Statutory employee Retirement Third-party sick pay						
					14 Oth	er	12c				
							12d				
f Employee's address and ZIP	ode										
15 State Employer's state ID nu	mber	16 State wages, tips, etc.	17 State	e incom	ie tax	18 Local wages, tips, etc.	19 Local inc	ome tax	20 Locality name		

Form **W-2** Wage and Tax Statement



Department of the Treasury—Internal Revenue Service
For Privacy Act and Paperwork Reduction
Act Notice, see the separate instructions.

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3737	UVOID CORRE	CTED				
PAYER'S/TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross distribution \$ 2 Earnings	OMB No. 1545-1760 Form 1099-Q (Rev. April 2025) For calendar year		Payments From Qualified Education Programs (Under Sections 529 and 530)	
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis	4 Type of transfer: a Trustee-to-t	rustee	Copy A	
RECIPIENT'S name		\$ 5 Distribution is from: a Private QTP	b QTP to Roth 6 Check if the recipien not the designated beneficiary		Service Center For filing information,	
Street address (including apt. no.)		b State QTP c Coverdell ESA	,		Privacy Act, and Paperwork Reduction Act Notice, see the	
City or town, state or province, country, and ZIP or foreign postal code Account number (see instructions)					General Instructions for Certain Information Returns.	
					www.irs.gov/Form1099	
Form 1000-0 (Poy 4 2025)	Cat No. 20002 I	varavira gav/Form10000	Department of the T	rocour	Internal Devenue Convice	

Form 1099-Q (Rev. 4-2025)

Cat. No. 32223J

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8383	U VOID CORRE	ECTED			
FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Payments received for qualified tuition and related expenses 2	OMB No. 1545-1574	Tuition Statement	
			Form 1098-T		
FILER'S employer identification no.	STUDENT'S TIN	3	Copy A For		
STUDENT'S name		4 Adjustments made for a prior year	5 Scholarships or grants	Internal Revenue Service Center	
		\$	\$	For filing information,	
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an	Privacy Act, and Paperwork Reduction Act Notice, see the	
City or town, state or province, country	and ZIP or foreign postal code	\$	academic period beginning January- March 2026	General Instructions for Certain	
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student	9 Checked if a graduate student	10 Ins. contract reimb./refund \$	Information Returns. www.irs.gov/Form1099	
4000 T					

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