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 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, 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	rocourt	Internal Devenue Convice	

Form 1099-Q (Rev. 4-2025)

Cat. No. 32223J

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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				

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8181		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	PAYER'S/BORROWER'S TIN	2 Outstanding mortgage principal \$	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		\$	\$	Privacy Act
		6 Points paid on purchase o	and Paperwor Reduction Ad Notice, see th	
Street address (including apt. no.)		7 If address of property as PAYER'S/BORROWER'S the address or description in	Gener Instructions fo Certa Informatio	
City or town, state or province, country, and ZIP or foreign postal code		8 Address or description of instructions)	Returns www.irs.gov/Form1099	
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 Page	www.irs.gov/Form109 e — Do Not Cu		

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PAYER'S name, street address, cit or foreign postal code, and telepho		rince, country, ZIP	1a Total o	ordinary dividends	OMB No. 1545-0110		
or foreign postar code, and telephone no.			\$		Form 1099-DIV	Dividends and	
			1b Qualified dividends (F		(Rev. January 2024)	Distributions	
					For calendar year		
			\$			1	
				capital gain distr.	2b Unrecap. Sec. 1250 gain	Copy A	
			\$		\$	_ Fo	
PAYER'S TIN	RECIPIENT'S TIN		2c Section	n 1202 gain	2d Collectibles (28%) gain	Internal Revenue Service Center	
			\$		\$	Service Certic	
			2e Section 897 ordinary dividends		2f Section 897 capital gain	File with Form 1096.	
			\$		\$		
RECIPIENT'S name			3 Nondi	vidend distributions	4 Federal income tax withhel		
			·		\$	For Privacy Ac and Paperwork	
			5 Section	n 199A dividends	6 Investment expenses	Reduction Act	
Street address (including apt. no.)			\$		\$	Notice, see the	
			7 Foreign tax paid		8 Foreign country or U.S. possession	current Genera	
			1.			Instructions fo	
City or town, state or province, cou	intry, and ZIP or foreign	n postal code	\$			Certair	
			9 Cash liquidation distributions		10 Noncash liquidation distribution	i iiioiiiiatioi	
			\$		\$	Returns	
		11 FATCA filing requirement	12 Exemp	ot-interest dividends	13 Specified private activity bond interest dividends		
			\$		\$		
Account number (see instructions)		2nd TIN not.	14 State	15 State identification no.	16 State tax withheld	1	
					\$		
		_			\$		
(024)	Cat. No. 1 ate Forms on	requirement 2nd TIN not.	\$ 14 State	15 State identification no.	13 Specified private activity bond interest dividends \$ 16 State tax withheld \$	- Internal Revenue Service	

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

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Cat. No. 14410K

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55555 AOID []	a Employee's soci	al security number	For Official Use Only OMB No. 1545-0029							
b Employer identification number (EIN)					1 Wages, tips, other compensation 2 Federal income tax withheld				ax withheld	
c Employer's name, address, and ZIP code					3 Social security wages 4 Social security tax withheld			x withheld		
				5 Medicare wages and tips 6 Medicare tax withheld			nheld			
					7 Social security tips 8 Allocated tips					
d Control number					9 10 Dependent care benefits			penefits		
e Employee's first name and initia	e Employee's first name and initial Last name Suff.		Suff.	11 Nonqualified plans 12a See instructions for		for box 12				
				13 Statutory employee Plan Third-party sick pay						
				14 Other		12c				
								12d C G G G G G G G G G G G G G G G G G G		
f Employee's address and ZIP co										
15 State Employer's state ID num	16 St	ate wages, tips, etc.	17 State in	ncome	e tax	18 Local wages,	tips, etc.	19 Local inc	come 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.

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