



This Product Contains Sensitive Taxpayer Data

Request Date: 10-12-2025  
Response Date: 10-12-2025  
Tracking Number: 108961241434

Wage and Income Transcript

SSN Provided: XXX-XX-6917  
Tax Period Requested: December, 2019

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): XXXXX9559  
JOES  
40 CHA

Employee:

Employee's Social Security Number: XXX-XX-6917  
DEVO T BARB  
309 NE

Submission Type:.....Original document  
Wages, Tips and Other Compensation:.....\$5,686.00  
Federal Income Tax Withheld:.....\$190.00  
Social Security Wages:.....\$5,686.00  
Social Security Tax Withheld:.....\$352.00  
Medicare Wages and Tips:.....\$5,686.00  
Medicare Tax Withheld:.....\$82.00  
Social Security Tips:.....\$0.00  
Allocated Tips:.....\$0.00  
Dependent Care Benefits:.....\$0.00  
Deferred Compensation:.....\$0.00  
Code "Q" Nontaxable Combat Pay:.....\$0.00  
Code "W" Employer Contributions to a Health Savings Account:.....\$0.00  
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:.....\$0.00  
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:.....\$0.00  
Code "R" Employer's Contribution to MSA:.....\$0.00  
Code "S" Employer's Contribution to Simple Account:.....\$0.00  
Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00  
Code "V" Income from exercise of non-statutory stock options:.....\$0.00  
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00  
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00  
Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$0.00  
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:.....\$0.00  
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:.....\$0.00  
Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00  
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close of the Calendar Year:.....\$0.00  
Third Party Sick Pay Indicator:.....Unanswered

Retirement Plan Indicator:.....Unanswered  
 Statutory Employee:.....Not Statutory Employee  
 W2 Submission Type:.....Original  
 W2 WHC SSN Validation Code:.....Correct SSN

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX7453  
 APEX  
 ONE DA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 C O 30

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXX6089  
 Date Sold or Disposed:.....01-24-2019  
 CUSIP Number:.....26924G508  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$1.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....ETF MA  
 Second Notice Indicator:.....  
 Date Acquired:.....01-02-2019  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Short-term  
 Applicable Check Box on Form 8949:  
 Short term transaction for which the cost or other basis is being reported to  
 the IRS  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX7453  
 APEX  
 ONE DA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 C O 30

Submission Type:.....Original document

Account Number (Optional):.....XXXXXXXXXXXX6090  
 Date Sold or Disposed:.....02-21-2019  
 CUSIP Number:.....26924G508  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$1.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....ETF MA  
 Second Notice Indicator:.....  
 Date Acquired:.....01-02-2019  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Short-term  
 Applicable Check Box on Form 8949:  
 Short term transaction for which the cost or other basis is being reported to the IRS  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

## Payer:

Payer's Federal Identification Number (FIN):XXXXX7453  
 APEX  
 ONE DA

## Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 C O 30

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXX6091  
 Date Sold or Disposed:.....03-21-2019  
 CUSIP Number:.....26924G508  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$1.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....ETF MA  
 Second Notice Indicator:.....  
 Date Acquired:.....01-02-2019  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Short-term  
 Applicable Check Box on Form 8949:  
 Short term transaction for which the cost or other basis is being reported to

the IRS

Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9876  
 SQUA  
 1455 M

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXX25T2  
 Date Sold or Disposed:.....10-26-2019  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Nothing checked  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$48.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....SEE DE  
 Second Notice Indicator:.....  
 Date Acquired:.....01-01-1900  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

This Product Contains Sensitive Taxpayer Data



This Product Contains Sensitive Taxpayer Data

Request Date: 10-12-2025  
Response Date: 10-12-2025  
Tracking Number: 108961244528

Wage and Income Transcript

SSN Provided: XXX-XX-6917  
Tax Period Requested: December, 2020

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): XXXXX9559  
JOES  
40 CHA

Employee:

Employee's Social Security Number: XXX-XX-6917  
DEVO T BARB  
309 NE

Submission Type:.....Original document  
Wages, Tips and Other Compensation:.....\$232.00  
Federal Income Tax Withheld:.....\$0.00  
Social Security Wages:.....\$232.00  
Social Security Tax Withheld:.....\$14.00  
Medicare Wages and Tips:.....\$232.00  
Medicare Tax Withheld:.....\$3.00  
Social Security Tips:.....\$0.00  
Allocated Tips:.....\$0.00  
Dependent Care Benefits:.....\$0.00  
Deferred Compensation:.....\$0.00  
Code "Q" Nontaxable Combat Pay:.....\$0.00  
Code "W" Employer Contributions to a Health Savings Account:.....\$0.00  
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:.....\$0.00  
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:.....\$0.00  
Code "R" Employer's Contribution to MSA:.....\$0.00  
Code "S" Employer's Contribution to Simple Account:.....\$0.00  
Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00  
Code "V" Income from exercise of non-statutory stock options:.....\$0.00  
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00  
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00  
Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$0.00  
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:.....\$0.00  
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:.....\$0.00  
Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00  
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close of the Calendar Year:.....\$0.00  
Third Party Sick Pay Indicator:.....Unanswered

Retirement Plan Indicator:.....Unanswered  
 Statutory Employee:.....Not Statutory Employee  
 W2 Submission Type:.....Original  
 W2 WHC SSN Validation Code:.....Correct SSN

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

## Payer:

Payer's Federal Identification Number (FIN):XXXXXX7453  
 APEX  
 ONE DA

## Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 C O 30

Submission Type:.....Original document  
 Account Number (Optional):.....XXXX1469  
 Date Sold or Disposed:.....01-06-2020  
 CUSIP Number:.....26924G508  
 Gross Proceeds:.....Gross proceeds minus commissions and option premiums  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$1.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$1.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0607  
 Second Notice Indicator:.....  
 Date Acquired:.....01-02-2019  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Long-term  
 Applicable Check Box on Form 8949:  
 Long term transaction for which the cost or other basis is being reported to the IRS  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

## Payer:

Payer's Federal Identification Number (FIN):XXXXXX7453  
 APEX  
 ONE DA

## Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 C O 30

Submission Type:.....Original document

Account Number (Optional):.....XXXX1470  
 Date Sold or Disposed:.....05-12-2020  
 CUSIP Number:.....26924G508  
 Gross Proceeds:.....Gross proceeds minus commissions and option premiums  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$1.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0517  
 Second Notice Indicator:.....  
 Date Acquired:.....01-02-2019  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Long-term  
 Applicable Check Box on Form 8949:  
 Long term transaction for which the cost or other basis is being reported to  
 the IRS  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

## Payer:

Payer's Federal Identification Number (FIN):XXXXXX6564  
 DRIV  
 97 MAI

## Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO BARB  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXX4958  
 Date Sold or Disposed:.....11-17-2020  
 CUSIP Number:.....88160R101  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$9.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$8.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0210  
 Second Notice Indicator:.....  
 Date Acquired:.....11-02-2020  
 Noncovered Security Indicator:.....Nothing checked  
 Type of Gain or Loss Code:.....Short-term  
 Applicable Check Box on Form 8949:  
 Short term transaction for which the cost or other basis is being reported to

the IRS

Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9876  
 SQUA  
 1455 M

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXX79T3  
 Date Sold or Disposed:.....03-03-2020  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Nothing checked  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$7.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....SEE DE  
 Second Notice Indicator:.....  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9876  
 SQUA  
 1455 M

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 309 NE

Submission Type:.....Original document



Account Number (Optional):.....XXXXXX88T3  
 Date Sold or Disposed:.....03-03-2020  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Nothing checked  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$71.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....SEE DE  
 Second Notice Indicator:.....  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9876  
 SQUA  
 1455 M

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXX95T3  
 Date Sold or Disposed:.....09-01-2020  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Nothing checked  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$161.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....SEE DE  
 Second Notice Indicator:.....  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B

or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-G

Payer:

Payer's Federal Identification Number (FIN):XXXXX6013  
 STAT  
 50 BAR

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 BARB DEVO T  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXX1838  
 RTAA Payments:.....\$0.00  
 Tax Withheld:.....\$0.00  
 Taxable Grants:.....\$0.00  
 Unemployment Compensation:.....\$0.00  
 Agricultural Subsidies:.....\$0.00  
 Prior Year Refund:.....\$88.00  
 Market gain on Commodity Credit Corporation loans repaid:.....\$0.00  
 Year of Refund:.....2019  
 1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business  
 Second TIN Notice:.....

This Product Contains Sensitive Taxpayer Data



This Product Contains Sensitive Taxpayer Data

Request Date: 10-12-2025  
Response Date: 10-12-2025  
Tracking Number: 108961248021

Wage and Income Transcript

SSN Provided: XXX-XX-6917  
Tax Period Requested: December, 2022

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN): XXXXX7608  
NICH  
261 N

Employee:

Employee's Social Security Number: XXX-XX-6917  
DEVO BARB  
325 E

Submission Type:.....Original document  
Wages, Tips and Other Compensation:.....\$432.00  
Federal Income Tax Withheld:.....\$0.00  
Social Security Wages:.....\$432.00  
Social Security Tax Withheld:.....\$26.00  
Medicare Wages and Tips:.....\$432.00  
Medicare Tax Withheld:.....\$6.00  
Social Security Tips:.....\$0.00  
Allocated Tips:.....\$0.00  
Dependent Care Benefits:.....\$0.00  
Deferred Compensation:.....\$0.00  
Code "Q" Nontaxable Combat Pay:.....\$0.00  
Code "W" Employer Contributions to a Health Savings Account:.....\$0.00  
Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation plan:.....\$0.00  
Code "Z" Income under section 409A on a nonqualified Deferred Compensation plan:.....\$0.00  
Code "R" Employer's Contribution to MSA:.....\$0.00  
Code "S" Employer's Contribution to Simple Account:.....\$0.00  
Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00  
Code "V" Income from exercise of non-statutory stock options:.....\$0.00  
Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00  
Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00  
Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$0.00  
Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b) Plan:.....\$0.00  
Code "FF" Permitted benefits under a qualified small employer health reimbursement arrangement:.....\$0.00  
Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00  
Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close of the Calendar Year:.....\$0.00  
Third Party Sick Pay Indicator:.....Unanswered

Retirement Plan Indicator:.....Unanswered  
 Statutory Employee:.....Not Statutory Employee  
 W2 Submission Type:.....Original  
 W2 WHC SSN Validation Code:.....Correct SSN

Form W-2 Wage and Tax Statement

Employer:

Employer Identification Number (EIN):XXXXX5086  
 PF C  
 8377 E

Employee:

Employee's Social Security Number:XXX-XX-6917  
 DEVO BARB  
 309 NE

Submission Type:.....Original document  
 Wages, Tips and Other Compensation:.....\$2,413.00  
 Federal Income Tax Withheld:.....\$0.00  
 Social Security Wages:.....\$1,235.00  
 Social Security Tax Withheld:.....\$149.00  
 Medicare Wages and Tips:.....\$2,413.00  
 Medicare Tax Withheld:.....\$35.00  
 Social Security Tips:.....\$1,178.00  
 Allocated Tips:.....\$0.00  
 Dependent Care Benefits:.....\$0.00  
 Deferred Compensation:.....\$0.00  
 Code "Q" Nontaxable Combat Pay:.....\$0.00  
 Code "W" Employer Contributions to a Health Savings Account:.....\$0.00  
 Code "Y" Deferrals under a section 409A nonqualified Deferred Compensation  
 plan:.....\$0.00  
 Code "Z" Income under section 409A on a nonqualified Deferred Compensation  
 plan:.....\$0.00  
 Code "R" Employer's Contribution to MSA:.....\$0.00  
 Code "S" Employer's Contribution to Simple Account:.....\$0.00  
 Code "T" Expenses Incurred for Qualified Adoptions:.....\$0.00  
 Code "V" Income from exercise of non-statutory stock options:.....\$0.00  
 Code "AA" Designated Roth Contributions under a Section 401(k) Plan:.....\$0.00  
 Code "BB" Designated Roth Contributions under a Section 403(b) Plan:.....\$0.00  
 Code "DD" Cost of Employer-Sponsored Health Coverage:.....\$0.00  
 Code "EE" Designated ROTH Contributions Under a Governmental Section 457(b)  
 Plan:.....\$0.00  
 Code "FF" Permitted benefits under a qualified small employer health  
 reimbursement arrangement:.....\$0.00  
 Code "GG" Income from Qualified Equity Grants Under Section 83(i):.....\$0.00  
 Code "HH" Aggregate Deferrals Under Section 83(i) Elections as of the Close  
 of the Calendar Year:.....\$0.00  
 Third Party Sick Pay Indicator:.....Unanswered  
 Retirement Plan Indicator:.....Unanswered  
 Statutory Employee:.....Not Statutory Employee  
 W2 Submission Type:.....Original  
 W2 WHC SSN Validation Code:.....Correct SSN

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX3BFC  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX87FD  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0011  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXX3954  
 Date Sold or Disposed:.....07-02-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0010  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXF732  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXX92DD  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0000  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXB8F3  
Date Sold or Disposed:.....02-06-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$84.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....52.171  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXCC2B  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$8.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....1.0007  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX7935  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX9363  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0012  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX2B8A  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0002  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX88C0  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0010  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXXX5E9A  
 Date Sold or Disposed:.....07-02-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0010  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXXX0C75  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXXX61B2  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0011  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX4B12  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXD45E  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX874C  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX5AF3  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXAC96  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX3ED7  
Date Sold or Disposed:.....02-10-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$9.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....1810.8  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX186B  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0004  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX2D28  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX1029  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0009  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXX0216  
 Date Sold or Disposed:.....07-02-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0011  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA2FD  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXEAO4  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX123A  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX4DCC  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX6D14  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX0BB3  
Date Sold or Disposed:.....03-12-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$13.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....4502.2  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXF8F0  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA25B  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$4.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....427584  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXDC7A  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX35B8  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0002  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX9C40  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$15.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....2.1777  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXX259F  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX57D0  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXBF9F  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA215  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0011  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXFBD3  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXAC27  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0010  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXX3707  
 Date Sold or Disposed:.....05-26-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0003  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA932  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX7489  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA778  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0009  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXA708  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXB8F3  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0011  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX188E  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX9F21  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX7E71  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0003  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXX596C  
 Date Sold or Disposed:.....07-02-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0010  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX0ED7  
Date Sold or Disposed:.....03-12-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$110.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....36057.  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX8BE7  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0011  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXCD19  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXE07F  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX6849  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXX1338  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX1272  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0009  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX166E  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0011  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX79B2  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX35D5  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0009  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXAE76  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0009  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXB233  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXXX236C  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXXX0E67  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$8.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....894846  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
 OKCO  
 ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 DEVO TYLE BARB  
 140 E

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXXXXXXXXXXXXXB3D0  
 Date Sold or Disposed:.....05-26-2022  
 CUSIP Number:.....0000000000000  
 Gross Proceeds:.....Gross proceeds  
 Bartering:.....\$0.00  
 Federal Income Tax Withheld:.....\$0.00  
 Proceeds:.....\$0.00  
 Aggregate Profit or (Loss):.....\$0.00  
 Realized Profit or (Loss):.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
 Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
 Cost or Basis:.....\$0.00  
 Wash Sale Loss Disallowed:.....\$0.00  
 Accrued Market Discount Amount:.....\$0.00  
 Description:.....0.0003  
 Second Notice Indicator:.....No Second Notice  
 Date Acquired:.....00-00-0000  
 Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
 Type of Gain or Loss Code:.....  
 Applicable Check Box on Form 8949:  
 Transaction if you cannot determine whether the recipient should check Box B  
 or Box E on Form 8949 because the holding period is unknown  
 Loss Not Allowed Indicator:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:



Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXXE505  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXX9000  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXB811  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0010  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX3F29  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX9410  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXXC609  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0009  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX1032  
Date Sold or Disposed:.....07-02-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

# Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:  
Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXX9183  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00

Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-B Proceeds From Broker and Barter Exchange Transactions

Payer:

Payer's Federal Identification Number (FIN):XXXXX9861  
OKCO  
ONE SA

Recipient:

Recipient's Identification Number:XXX-XX-6917  
DEVO TYLE BARB  
140 E

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXXXXXDF0D  
Date Sold or Disposed:.....05-26-2022  
CUSIP Number:.....0000000000000  
Gross Proceeds:.....Gross proceeds  
Bartering:.....\$0.00  
Federal Income Tax Withheld:.....\$0.00  
Proceeds:.....\$0.00  
Aggregate Profit or (Loss):.....\$0.00  
Realized Profit or (Loss):.....\$0.00  
Unrealized Profit or (Loss) 12/31 Prior Year:.....\$0.00  
Unrealized Profit or (Loss) 12/31 Current Year:.....\$0.00  
Cost or Basis:.....\$0.00  
Wash Sale Loss Disallowed:.....\$0.00  
Accrued Market Discount Amount:.....\$0.00  
Description:.....0.0003  
Second Notice Indicator:.....No Second Notice  
Date Acquired:.....00-00-0000  
Noncovered Security Indicator:...Noncovered Security Basis not reported to IRS  
Type of Gain or Loss Code:.....  
Applicable Check Box on Form 8949:  
Transaction if you cannot determine whether the recipient should check Box B  
or Box E on Form 8949 because the holding period is unknown  
Loss Not Allowed Indicator:.....  
FATCA Filing Requirement:.....Box not checked no Filing Requirement  
Proceeds from:.....Box not checked

Form 1099-C Cancellation of Debt

Creditor:

Creditor's Federal Identification Number (FIN):XXXXX8946  
MCBU  
1100 B

Debtor:  
Debtor's Identification Number:XXX-XX-6917  
DEVO BARB  
309 NE

Submission Type:.....Corrected document  
Account Number (Optional):.....XXX65-A  
Date Canceled:.....12-31-2022  
Property Fair Market Value:.....\$0.00  
Amount of Debt Discharged:.....\$1,000.00  
Interest Forgiven Amount:.....\$0.00  
Identifiable Event Code:.....Insignificant  
Debt Description:.....LOAN  
Personal Liability Indicator:.....Box checked-Personally Liable

Form 1099-G

Payer:  
Payer's Federal Identification Number (FIN):XXXXX1818  
DEPA  
PO BOX

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO T BARB  
309 NE

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXX0001  
RTAA Payments:.....\$0.00  
Tax Withheld:.....\$0.00  
Taxable Grants:.....\$0.00  
Unemployment Compensation:.....\$22,119.00  
Agricultural Subsidies:.....\$0.00  
Prior Year Refund:.....\$0.00  
Market gain on Commodity Credit Corporation loans repaid:.....\$0.00  
Year of Refund:.....Not Set  
1099G Offset:.....Not Refund, Credit, or Offset for Trade or Business  
Second TIN Notice:.....

Form 1099-DIV

Payer:  
Payer's Federal Identification Number (FIN):XXXXX8416  
ACOR  
5300 C

Recipient:  
Recipient's Identification Number:XXX-XX-6917  
DEVO BARB  
C O 30

Submission Type:.....Original document  
Account Number (Optional):.....XXXXXXXXXXXXX01B1

Tax Withheld:.....\$0.00  
 Capital Gains:.....\$0.00  
 Non-Dividend Distribution:.....\$0.00  
 Cash Liquidation Distribution:.....\$0.00  
 Non-Cash Liquidation Distribution:.....\$0.00  
 Investment Expense:.....\$0.00  
 Ordinary Dividend:.....\$0.00  
 Collectibles (28%) Gain:.....\$0.00  
 Unrecaptured Section 1250 Gain:.....\$0.00  
 Section 1202 Gain:.....\$0.00  
 Foreign Tax Paid:.....\$0.00  
 Qualified Dividends:.....\$0.00  
 Section 199A REIT Dividends:.....\$0.00  
 Second Notice Indicator:.....No Second Notice  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement  
 Exempt Interest Dividends:.....\$0.00  
 Specified Private Activity Bond Interest Dividend:.....\$0.00  
 Section 897 Ordinary Dividends:.....\$0.00  
 Section 897 Capital Gain:.....\$0.00

Form 1099-INT

Payer:

Payer's Federal Identification Number (FIN):XXXXX9523  
 SOCI  
 234 1S

Recipient:

Recipient's Identification Number:XXX-XX-6917  
 BARB DEVO  
 309 NE

Submission Type:.....Original document  
 Account Number (Optional):.....XXXXXX72T1  
 Interest:.....\$24.00  
 Tax Withheld:.....\$0.00  
 Savings Bonds:.....\$0.00  
 Investment Expense:.....\$0.00  
 Interest Forfeiture:.....\$0.00  
 Foreign Tax Paid:.....\$0.00  
 Tax-Exempt Interest:.....\$0.00  
 Specified Private Activity Bond Interest:.....\$0.00  
 Market Discount:.....\$0.00  
 Bond Premium:.....\$0.00  
 Bond Premium on Tax Exempt Bond:.....\$0.00  
 Bond Premium on Treasury Obligations:.....\$0.00  
 Second Notice Indicator:.....No Second Notice  
 Foreign Country or US Possession:.....  
 CUSIP Number:.....  
 FATCA Filing Requirement:.....Box not checked no Filing Requirement

This Product Contains Sensitive Taxpayer Data



You have successfully submitted a wage complaint to the NJ Division of Wage and Hour Compliance.

**Complainant Name: Devon T. Barber**

**Complaint Date: 10/12/2025 07:28 pm**

**Confirmation No.: 369572**

**Please check the status of your complaint at**

**<https://wagehour.dol.state.nj.us/WHATS.Public.CheckStatus/#!/EN/ConfirmationNumber>**

**PLEASE RETAIN A COPY OF THIS EMAIL FOR YOUR RECORDS.**

Please add domain name "@dol.nj.gov" to your email safe list to prevent important notices from being filtered into your spam/junk folder.

Your complaint will be reviewed by the NJ Division of Wage and Hour Compliance. If further information is required, you will be contacted by email, telephone or regular mail.

If you have any changes or corrections to this complaint, please do not file a new complaint. Email [wage.hour@dol.nj.gov](mailto:wage.hour@dol.nj.gov) or call [609-292-2305](tel:609-292-2305) with your changes and be sure to provide your Confirmation No. Division staff will then update your complaint accordingly.

| <b><u>Complaint Type</u></b>         |      |
|--------------------------------------|------|
| <b>Who is filing this complaint?</b> | Self |

| <b><u>Employer information</u></b>  |                                       |              |              |              |
|---|---------------------------------------|--------------|--------------|--------------|
| <b>Business name</b>  | JOES PAINTING AND RENOVATIONS 11, LLC |              |              |              |
| <b>Street address</b>   | 40 CHAPMAN BLVD                       |              |              |              |
| <b>City</b>   | Somers Point                          |              |              |              |
| <b>State</b>  | NJ                                    |              |              |              |
| <b>Is mailing address different than street address?</b>                      |                                       |              | No           |              |
| <b>Do you know the name(s) of the owners or the officers of this company?</b> |                                       |              | Yes          |              |
| <b>First name</b>   | <b>Last name</b>                      | <b>Title</b> | <b>Phone</b> | <b>Email</b> |
| Joseph  | Hardemon                              | Owner        |              |              |
| Joshua  | Hardemon                              | Co owner     |              |              |

|  |          |
|--|----------|
| <b>Nature of business</b><br>Licensed New Jersey home improvement contractor |          |
| <b>Has this employer filed for bankruptcy?</b>                               | Not Sure |

|  |   |
|--|---|
| <b><u>Complainant information</u></b>  |   |
| <b>Month and year of birth</b>   | 12/1997                                     |
| <b>First name</b>  | Devon                                       |
| <b>Last name</b>   | Barber                                      |
| <b>Middle initial</b>  | T   |
| <b>Mailing address</b>   | 325 E Jimmie Leeds Rd, Suite 7              |
| <b>City</b>  | Galloway                                    |
| <b>State</b>   | NJ  |
| <b>Zip code</b>  | 08205 - 8205                                |
| <b>Phone number</b>  | <a href="tel:609-665-9350">609-665-9350</a> |
| <b>Email</b>   | DTB33@ProtonMail.com                        |
| <b>Social security number</b>  | XXX-XX-XXXX                                 |
| <b>Are you, or were you a member of a union when employed with JOES PAINTING AND RENOVATIONS 11, LLC</b> | No  |

|   |                        |
|---|------------------------|
| <b><u>Employment information</u></b>                                      |                        |
| <b><u>Location details #1</u></b>   |                        |
| <b>Did you work for this employer at the street address you provided?</b> | No                     |
| <b>Job site</b>   | Rehabilitation project |
| <b>Street address</b>   | 1525 W. Aloe Strest    |
| <b>City</b>   | Galloway               |
| <b>State</b>  | NJ                     |
| <b>Zip code</b>   | 08205                  |

**Employment details**

|  |                       |
|--|-----------------------|
| <b>First day worked</b>                        | 11/07/2019            |
| <b>Last day worked</b>                         | 07/11/2022            |
| <b>Are you still working at this location?</b> | No                    |
| <b>Job title</b>                               | Renovation specialist |

**Provide a brief description of your job duties at this location**

Performed a wide range of construction and renovation tasks, including mitering and installing trim, caulking, painting, demolishing plaster and lath, installing and finishing drywall, preparing surfaces for painting, grouting and cleaning tile showers, and installing kitchen backsplash tiles. Additionally, I handled property maintenance such as mowing the grass and purchasing two air conditioners. My personal electric mower was left on-site involuntarily.

|   |                     |
|---|---------------------|
| <b>Supervisor name</b>                      | Joseph Hardemon Jr. |
| <b>Supervisor title</b>                     | Owner               |
| <b>Rate of pay</b>                          | Per day             |
| <b>Gross amount</b>                         | \$200.00            |
| <b>Pay frequency</b>                        | Weekly              |
| <b>What is your normal pay date?</b>        | Friday              |
| <b>What is the last date you were paid?</b> | 06/03/2022          |

**If date details are not available, please provide the following:****Time period**

June 5, 2022 - July 11, 2022.

|  |           |
|--|-----------|
| <b>What is the total amount of wages (before tax deductions) you believe the employer owes you? (If you are not sure, please provide an estimate.)</b> | \$4000.00 |
|--|-----------|

**Complaint reason details**

- Wages not paid
- Paycheck Bounced or Unable to cash paycheck

- Last paycheck not paid
- Improperly Classified as an Independent Contractor in the Construction Industry N.J.S.A. 34:20-1 et seq.

**You have indicated that this employer does OWE you wages or money. If there are other reasons for filing this complaint, please select the reason(s) from the below list.**

I am filing this complaint regarding unpaid wages from my employment with Joseph Hardemon Jr. I previously filed a complaint and now have IRS records proving I was misclassified as an independent contractor and never paid. In 2022, I left for another contractor, after which I experienced retaliation, including being falsely accused, arrested, and charged in connection to the wage dispute.

**Did you ask your supervisor or any employer representative for the money you believe is due?** Yes

**Supervisor name** Joseph Hardemon Jr.

**Supervisor title** NJ HIC, owner

**What was the outcome?**

Joseph Hardemon Jr. did not pay. He claimed his father interfered with our agreement and said my living on the construction site counted as payment, but the agreed \$200/day rate was never honored.

### **Documents**

| <b>Document type</b> | <b>File name</b>                 | <b>File size</b> | <b>File type</b> |
|----------------------|----------------------------------|------------------|------------------|
| OTHER                | ProofofEmploymentwithJoe.pdf     | 31.06 KB         | .pdf             |
| OTHER                | Proofofemployment2020.pdf        | 33.99 KB         | .pdf             |
| OTHER                | ProofofemploymentwithNAC2022.pdf | 110.01 KB        | .pdf             |
| OTHER                | IMG_2975.jpeg                    | 325.74 KB        | .jpeg            |
| OTHER                | AmendedComplaint.pdf             | 202.46 KB        | .pdf             |
|                      |                                  | 2.03             |                  |

|       |  |         |      |
|-------|--|---------|------|
| OTHER | PassportCard-DevonBarber.pdf               | MB      | .pdf |
| OTHER | PostConvictionReliefandLegalMemorandum.pdf | 8.11 MB | .pdf |

### **Certification**

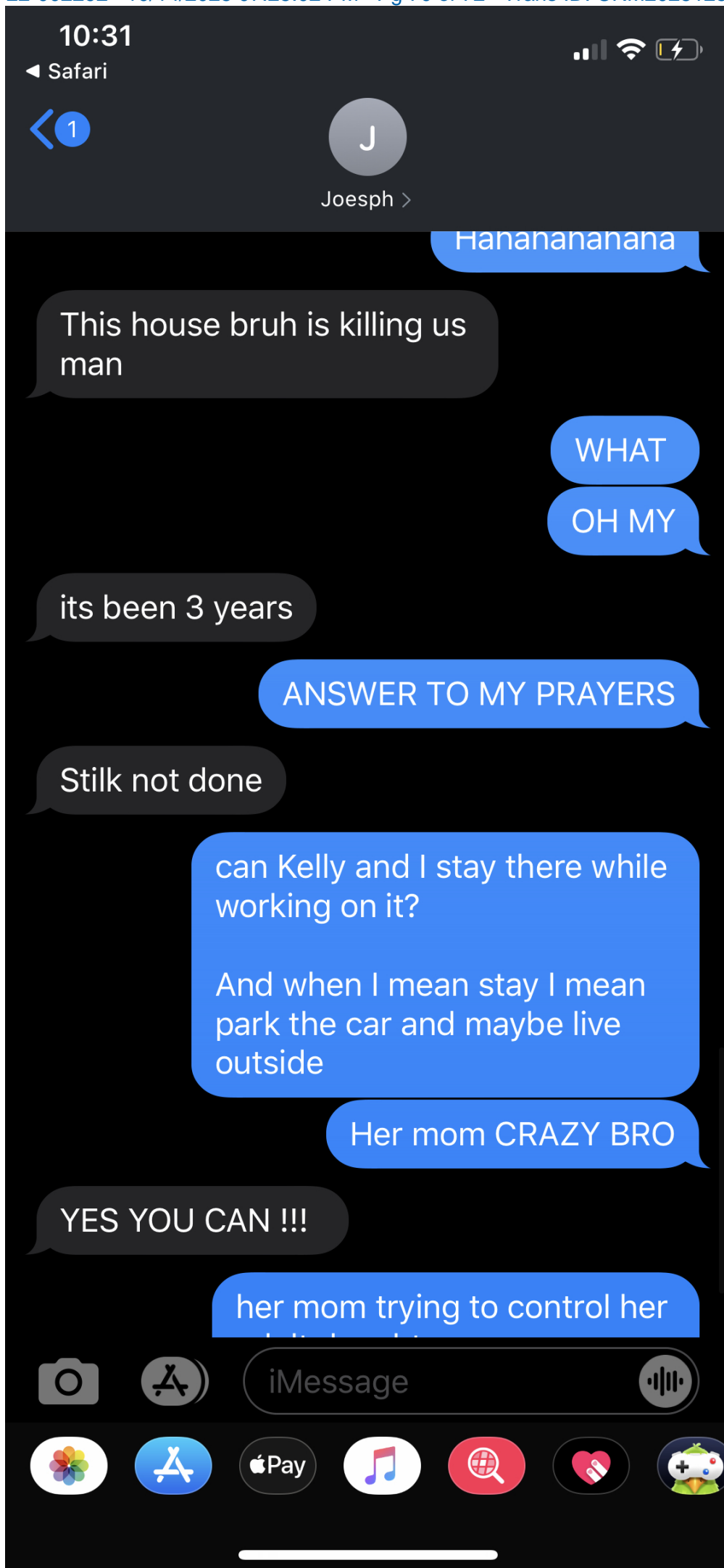
I request the NJ Division of Wage and Hour Compliance investigate this complaint against *JOES PAINTING AND RENOVATIONS 11, LLC*.

I understand that acceptance of this complaint by the NJ Division of Wage and Hour Compliance does not imply that the employer is in violation of any labor law or regulation.

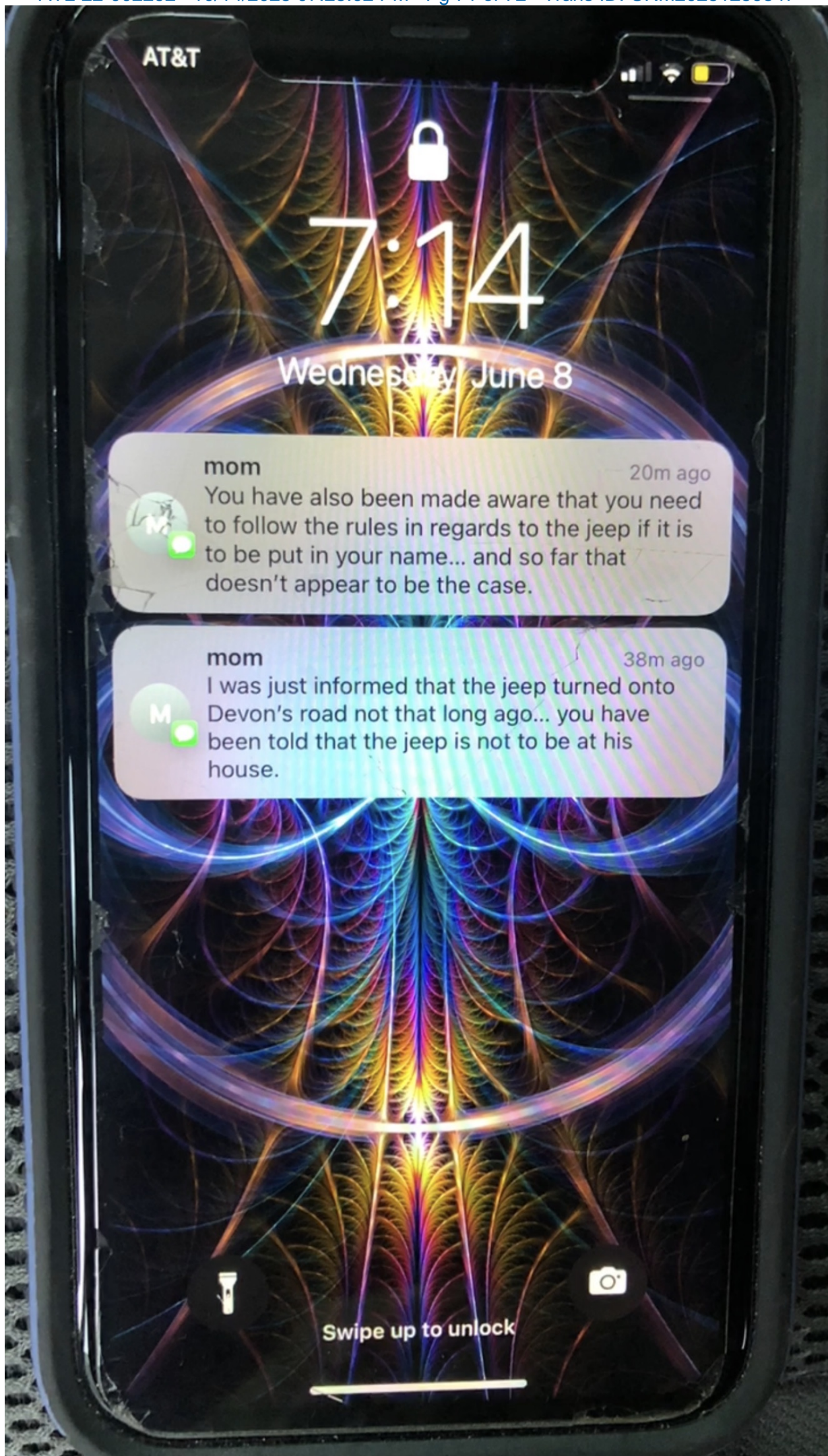
I understand that acceptance of this complaint by the NJ Division of Wage and Hour Compliance does not guarantee collection of any wages due.

I understand that in general, the public has the right, under the Open Public Records Act (OPRA), to request most information kept as part of any public record however, the New Jersey Department of Labor and Workforce Development will endeavor to protect the confidentiality of a complainant or a witness to the maximum extent allowable by law.

I understand that authorized personnel from the NJ Division of Wage and Hour Compliance may communicate with me via email regarding this complaint. These communications will be sent to: *DTB33@ProtonMail.com*







12:42

5G 25%



June 27, 2022

10:50 AM

