# **Additional Information**

# 3(1). Specify income recipient's relationship to veteran Line 1:

CHÍLD

# 3(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other)

Jane Doe

# 3(3). Specify the type of income Line 1:

WAGES

## 3(4). Gross monthly income Line 1:

\$99,999.99

# **3(5).** Specify income payer (name of business, financial institution, or program, etc.) Line 1: Generic Company, LLC

3(1). Specify income recipient's relationship to veteran Line 2:

OTHER

# 3(1)(OTHER). Specify income recipient's relationship to veteran Line 2:

Cousin

# 3(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 2:

Sam Jenkins

## 3(3). Specify the type of income Line 2:

OTHER

# 3(3)(OTHER). Specify the type of income Line 2:

Stocks

#### 3(4). Gross monthly income Line 2:

\$99.00

# 3(5). Specify income payer (name of business, financial institution, or program, etc.) Line 2:

Investment Company

# 3(1). Specify income recipient's relationship to veteran Line 3:

VETERAN

### 3(3). Specify the type of income Line 3:

SÒĆIAL\_SEĆURITÝ

### 3(4). Gross monthly income Line 3:

\$102.33

# 3(5). Specify income payer (name of business, financial institution, or program, etc.) Line 3:

Social Security Administration

#### 3(1). Specify income recipient's relationship to veteran Line 4:

**SPOUSE** 

#### 3(3). Specify the type of income Line 4:

RÉTIREMENT PENSION

## 3(4). Gross monthly income Line 4:

\$1,099.99

# 3(5). Specify income payer (name of business, financial institution, or program, etc.) Line 4:

Pension Benefit Management

## 3(1). Specify income recipient's relationship to veteran Line 5:

PÀŔENT

# 3(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 5:

**Edmund Doe** 

## 3(3). Specify the type of income Line 5:

CIVIL\_SERVICE

## 3(4). Gross monthly income Line 5:

\$12,345.67

## 3(5). Specify income payer (name of business, financial institution, or program, etc.) Line 5:

Personnel Management

## 3(1). Specify income recipient's relationship to veteran Line 6:

CÚSTODIAN

# 3(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 6:

Sam Doe

# 3(3). Specify the type of income Line 6:

UNEMPLOYMENT

#### 3(4). Gross monthly income Line 6:

\$1,000.00

## 3(5). Specify income payer (name of business, financial institution, or program, etc.) Line 6:

Agency of Unemployment

#### 5(1). Specify income recipient's relationship to veteran Line 1:

CÙŚTODIAN

# 5(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 1:

Lille 1.

Jim Brown

#### 5(3). Identify the type of asset and submit the required form associated Line 1:

FÀŔM

#### 5(4). Gross monthly income Line 1:

\$5,555.55

#### 5(5). Specify value of your portion of the property Line 1:

\$5,555,555

### 5(1). Specify income recipient's relationship to veteran Line 2:

OTHER

#### 5(1)(OTHER). Specify income recipient's relationship to veteran Line 2:

#### Friend

# 5(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 2:

**Brandon Jones** 

# 5(3). Identify the type of asset and submit the required form associated Line 2:

BÙŚINESS

### 5(4). Gross monthly income Line 2:

\$999.99

# 5(5). Specify value of your portion of the property Line 2:

\$10,000.00

## 5(1). Specify income recipient's relationship to veteran Line 3:

PÀŘENT

# 5(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 3:

**Edmund Doe** 

## 5(3). Identify the type of asset and submit the required form associated Line 3:

RENTAL PROPERTY

### 5(4). Gross monthly income Line 3:

\$123.45

## 5(5). Specify value of your portion of the property Line 3:

\$12,345.67

#### 5(1). Specify income recipient's relationship to veteran Line 4:

CUSTODIAN

# 5(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 4:

Jim Brown

## 5(3). Identify the type of asset and submit the required form associated Line 4:

FÀŔM

#### 5(4). Gross monthly income Line 4:

\$1,000.00

## 5(5). Specify value of your portion of the property Line 4:

\$12,345.67

#### 6(1). Specify income recipient's relationship to veteran Line 1:

SPÓUSE

#### 6(3). Income type other Line 1:

Rental

## 6(3). Specify how income is generated Line 1:

OTHER

#### 6(4). Gross monthly income Line 1:

\$12,345.67

# 6(5). Specify fair market value of this asset Line 1:

\$12.345.678.91

#### 6(6). Can this asset be sold? Line 1:

false

## 6(7). Explain any mitigating circumstances that prevent the sale of this asset Line 1:

Contractual obligations

## 6(1). Specify income recipient's relationship to veteran Line 2:

SPOUSE

## 6(3). Specify how income is generated Line 2:

INTELLECTUAL\_PROPERTY

### 6(4). Gross monthly income Line 2:

\$100.00

# 6(5). Specify fair market value of this asset Line 2:

\$1,000.00

#### 6(6). Can this asset be sold? Line 2:

true

#### 6(1). Specify income recipient's relationship to veteran Line 3:

OTHER

## 6(1)(OTHER). Relationship type other Line 3:

Sibling

# 6(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 3:

John Smith

## 6(3). Specify how income is generated Line 3:

USE OF LAND

#### 6(4). Gross monthly income Line 3:

\$123.00

#### 6(5). Specify fair market value of this asset Line 3:

\$1,234.00

#### 6(6). Can this asset be sold? Line 3:

trile

### 6(1). Specify income recipient's relationship to veteran Line 4:

PARENT

# 6(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 4:

John Doe

### 6(3). Specify how income is generated Line 4:

MINERALS\_LUMBER

#### 6(4). Gross monthly income Line 4:

\$100.00

# 6(5). Specify fair market value of this asset Line 4:

\$300.00

## 6(6). Can this asset be sold? Line 4:

true

## 7(1). Specify asset's original owner's relationship to veteran Line 1:

OTHER

## 7(1)(OTHER). Specify asset's original owner's relationship to veteran (other) Line 1:

Second cousin twice removed of my mother in law

# 7(10). What was the sale price? (if applicable) Line 1:

\$823,456,700.89

# 7(11). What was the gain? (capital gain, etc.) Line 1:

\$723,456,700.89

## 7(2). Specify how the asset was transferred Line 1:

OTHER

## 7(2)(OTHER). Specify how the asset was transferred (other) Line 1:

Earned income from doing work on my siblings house to clean in

#### 7(3). What asset was transferred? Line 1:

Clothes from my grandmothers attic which have been passed down through the family and are priceless - value estimated

#### 7(4). Who received the asset? Line 1:

JohnsonbergerheimerJohnathan JacobJingleheimerSchmidt Jr.

#### 7(5). Relationship to new owner Line 1:

Siblina

#### 7(6). Was the sale reported to the irs? Line 1:

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# 7(8). Was the asset transferred for less than fair market value? Line 1:

1

## 7(9). What was the fair market value when transferred? Line 1:

\$100,000,000.00

# 7(1). Specify asset's original owner's relationship to veteran Line 2:

OTHER

# 7(1)(OTHER). Specify asset's original owner's relationship to veteran (other) Line 2:

Cousin

#### 7(10). What was the sale price? (if applicable) Line 2:

\$8,234,567.89

### 7(11). What was the gain? (capital gain, etc.) Line 2:

\$7,234,567.89

### 7(2). Specify how the asset was transferred Line 2:

OTHER

#### 7(2)(OTHER). Specify how the asset was transferred (other) Line 2:

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**7(3). What asset was transferred? Line 2:** Clothes

# 7(4). Who received the asset? Line 2:

John Doe Jr.

# 7(5). Relationship to new owner Line 2:

Sibling

# 7(6). Was the sale reported to the irs? Line 2:

U

# 7(8). Was the asset transferred for less than fair market value? Line 2:

# **7(9).** What was the fair market value when transferred? Line 2: \$1,000,000.00

7(1). Specify asset's original owner's relationship to veteran Line 3:

# 7(10). What was the sale price? (if applicable) Line 3:

\$100.00

CHILD

# 7(11). What was the gain? (capital gain, etc.) Line 3:

\$0.00

## 7(2). Specify how the asset was transferred Line 3:

**GIFTED** 

#### 7(3). What asset was transferred? Line 3:

Artwork

#### 7(4). Who received the asset? Line 3:

Jacob Doe Sr.

#### 7(5). Relationship to new owner Line 3:

Aunt

#### 7(6). Was the sale reported to the irs? Line 3:

1

# 7(8). Was the asset transferred for less than fair market value? Line 3:

# **7(9).** What was the fair market value when transferred? Line 3: \$123.12

# 7(1). Specify asset's original owner's relationship to veteran Line 4:

**PÀŔEN**T

# 7(10). What was the sale price? (if applicable) Line 4:

\$2,000.00

#### 7(11). What was the gain? (capital gain, etc.) Line 4:

\$200.99

7(2). Specify how the asset was transferred Line 4: TŘÁDED 7(3). What asset was transferred? Line 4: Bike 7(4). Who received the asset? Line 4: John Doe Jr. 7(5). Relationship to new owner Line 4: **Brother** 7(6). Was the sale reported to the irs? Line 4: 7(8). Was the asset transferred for less than fair market value? Line 4: 7(9). What was the fair market value when transferred? Line 4: \$1,800.99 8B. Date trust established (mm/dd/yyyy) Line 1: 1982-02-02 8C. Specify market value of all assets within the trust at time of establishment Line 1: \$500,000.00 8D. Specify type of trust established Line 1: **IRREVOCABLE** 8E. Have you added funds to the trust after it was established? Line 1: false 8H. Are you receiving income from the trust? Line 1: false 8J. Is the trust being used to pay for or to reimburse someone else for your medical expenses? Line 1: false 8L. Was the trust established for a child of the veteran who was incapable of self-support prior to reaching age 18? Line 1: 8M. Do you have any additional authority or control of the trust? Line 1: false 8B. Date trust established (mm/dd/yyyy) Line 2: 1982-02-02 8C. Specify market value of all assets within the trust at time of establishment Line 2: \$9.000.000.00

**8E.** Have you added funds to the trust after it was established? Line 2: true

8D. Specify type of trust established Line 2:

BURIĀL

# 8F. When did you add funds? (mm/dd/yyyy) Line 2: 1985-02-01 8G. How much did you add? Line 2: \$200.12 8H. Are you receiving income from the trust? Line 2: true 81. How much do vou receive annually? Line 2: \$80,000.00 8J. Is the trust being used to pay for or to reimburse someone else for your medical expenses? Line 2: true 8K. How much is being reimbursed monthly? Line 2: \$123,456.78 8L. Was the trust established for a child of the veteran who was incapable of self-support prior to reaching age 18? Line 2: true 8M. Do you have any additional authority or control of the trust? Line 2: 9B. Specify date annuity was established Line 1: 2020-01-01 9C. Specify market value of asset at time of annuity purchase Line 1: \$1,234,568.89 9D. Have you added funds to the annuity in the current or prior three years? Line 1: 9E. When did you add funds? Line 1: 2022-02-02 9F. How much did you add? Line 1: \$2,222,222.22

9G. Is the annuity revocable or irrevocable? Line 1:

9H. Do you receive income from the annuity? Line 1:

true

91. If yes in 9h, provide annual amount received Line 1:

\$1,222,333.44

9J. Can the annuity be liquidated? Line 1:

9K. If yes in 9j, provide the surrender value Line 1:

\$5,666,777.88

9B. Specify date annuity was established Line 2:

1920-01-01

9C. Specify market value of asset at time of annuity purchase Line 2: \$123.45 9D. Have you added funds to the annuity in the current or prior three years? Line 2: false 9G. Is the annuity revocable or irrevocable? Line 2: false 9H. Do you receive income from the annuity? Line 2: false 9J. Can the annuity be liquidated? Line 2: false 10(1). Specify asset owner's relationship to the veteran Line 1: VETERAN 10(2). Specify type of asset (cash, art, etc.) Line 1: Cash 10(3). Specify value of your portion of the property Line 1: \$11,222,333.44 10(4). Specify asset location (financial institution, property address, etc.) Line 1: Financial institution 10(1). Specify asset owner's relationship to the veteran Line 2: **SPOUSE** 10(2). Specify type of asset (cash, art, etc.) Line 2: 10(3). Specify value of your portion of the property Line 2: \$123.45 10(4). Specify asset location (financial institution, property address, etc.) Line 2: 123 Main St 10(1). Specify asset owner's relationship to the veteran Line 3: CHÌLD 10(2). Specify type of asset (cash, art, etc.) Line 3: Coins 10(3). Specify value of your portion of the property Line 3: \$10.00 10(4). Specify asset location (financial institution, property address, etc.) Line 3: 123 Main St

10(1). Specify asset owner's relationship to the veteran Line 4:

10(3). Specify value of your portion of the property Line 4:

10(2). Specify type of asset (cash, art, etc.) Line 4:

**PARENT** 

Chandelier

\$2,000.00

# 10(4). Specify asset location (financial institution, property address, etc.) Line 4: 123 Main St

**10(1). Specify asset owner's relationship to the veteran Line 5:** OTHER

# **10(1)(OTHER).** Specify asset owner's relationship to the veteran Line 5: Sibling

10(2). Specify type of asset (cash, art, etc.) Line 5: Eggs

# 10(3). Specify value of your portion of the property Line 5:

\$2,345.67

# **10(4).** Specify asset location (financial institution, property address, etc.) Line 5: Henhouse

# 11(1). Specify income recipient's relationship to veteran Line 1: OTHER

# 11(1)(OTHER). Specify income recipient's relationship to veteran (other) Line 1: Sibling

# 11(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 1:

John Smith

# 11(3). Specify income payer (name of business, financial institution, etc.) Line 1: Banking America

# 11(4). Specify type of income received (interest, dividends, etc.) Line 1: Dividends

# 11(5). Specify frequency of income received Line 1:

ONE TIME

# 11(6). Date income last paid (mm/dd/yyyy) Line 1:

01/01/2022

# 11(7). What was the gross annual amount reported to the irs? Line 1:

\$123,456.78

# 11(1). Specify income recipient's relationship to veteran Line 2:

CUSTODIAN

# 11(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 2:

Brandon Johnson

# 11(3). Specify income payer (name of business, financial institution, etc.) Line 2: George Smith

# 11(4). Specify type of income received (interest, dividends, etc.) Line 2: Interest

# 11(5). Specify frequency of income received Line 2:

**IRREGULAR** 

# 11(6). Date income last paid (mm/dd/yyyy) Line 2:

05/01/2000

## 11(7). What was the gross annual amount reported to the irs? Line 2:

\$200,000.00

#### 11(1). Specify income recipient's relationship to veteran Line 3:

VETÉRAN

## 11(3). Specify income payer (name of business, financial institution, etc.) Line 3:

**Banking America** 

## 11(4). Specify type of income received (interest, dividends, etc.) Line 3:

**Payments** 

## 11(5). Specify frequency of income received Line 3:

RECURRING

## 11(6). Date income last paid (mm/dd/yyyy) Line 3:

05/01/1920

# 11(7). What was the gross annual amount reported to the irs? Line 3:

\$123.45

#### 12(1). Specify income recipient's relationship to veteran Line 1:

CUSTODIAN

# 12(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 1:

George Bankman

## 12(3). Specify income payer (name of business, financial institution, etc.) Line 1:

Bank of America

# 12(4). If the income resumes, what amount do you expect to receive? Line 1:

\$123,567.90

# 12(5). Date payments will resume (mm/dd/yyyy) Line 1:

04/01/2026

#### 12(5). Payment will resume Line 1:

YES

### 12(6). Waived gross monthly income Line 1:

\$123,456.78

## 12(1). Specify income recipient's relationship to veteran Line 2:

**PARENT** 

# 12(2). Specify name of income recipient (only needed if custodian of child, child, parent, or other) Line 2:

John Smith

## 12(3). Specify income payer (name of business, financial institution, etc.) Line 2:

Bank of America

#### 12(5). Payment will resume Line 2:

NO

# **12(6). Waived gross monthly income Line 2:** \$100.00

# **12(1). Specify income recipient's relationship to veteran Line 3:** VETERAN

**12(3).** Specify income payer (name of business, financial institution, etc.) Line 3: Banking Place

# **12(5). Payment will resume Line 3:** NO

**12(6).** Waived gross monthly income Line 3: \$222.22