| CORRECTED | (if checked) |
|-----------|--------------|
|-----------|--------------|

| PAYER'S name, street address, city or foreign postal code, and telephone Langworth LLC 874 Sheldon Curve Tonjaburgh, NE 86799 555-867-5309 |                    | country, ZIP                                                        | Payer's RTN (opposed payer Filter    1 Interest income  \$ 2 Early withdraw | 200.00                                              | Forr<br>(Re     | B No. 1545-0112 n <b>1099-INT</b> ev. January 2024) r calendar year 2024 | Interd<br>Inco                                              |        |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------|-----------------|--------------------------------------------------------------------------|-------------------------------------------------------------|--------|
| PAYER'S TIN RECIPIENT'S TIN                                                                                                                |                    |                                                                     | \$ 3 Interest on U.S                                                        | - For Recip                                         | oient           |                                                                          |                                                             |        |
| 00-0217588                                                                                                                                 | 000-85-738         | \$                                                                  |                                                                             |                                                     | 400.00          |                                                                          |                                                             |        |
| RECIPIENT'S name                                                                                                                           |                    |                                                                     | 4 Federal income                                                            | 4 Federal income tax withheld 5 Investment expenses |                 |                                                                          |                                                             | nt tax |
| Rhonda Kulas                                                                                                                               |                    | \$ 6 Foreign tax pai                                                | <b>500.00</b>                                                               |                                                     | 600.00          | -Ibeina turnished t                                                      | to the                                                      |        |
| Street address (including apt. no.)                                                                                                        |                    | \$ 700.00 foreignCountry                                            |                                                                             |                                                     | required to     |                                                                          |                                                             |        |
| 21949 Spencer Island                                                                                                                       |                    |                                                                     | 8 Tax-exempt in                                                             |                                                     |                 | fied private activity bond                                               | return, a negligence<br>penalty or other<br>sanction may be |        |
| City or town, state or province, country, and ZIP or foreign postal code                                                                   |                    | \$                                                                  | 800.00                                                                      | \$                                                  | 900.00          |                                                                          |                                                             |        |
| Diannaberg, AL 46560                                                                                                                       |                    |                                                                     | 10 Market discount 11 Bond premium                                          |                                                     |                 | this income is<br>taxable and the IRS<br>determines that it has          |                                                             |        |
|                                                                                                                                            |                    | FATCA filing                                                        | <b>1</b> \$                                                                 | 1000.00                                             | \$              | 1100.00                                                                  |                                                             |        |
| requirement                                                                                                                                |                    | 12 Bond premium on Treasury obligations 13 Bond premium on tax-exem |                                                                             |                                                     | <b>-</b>        |                                                                          |                                                             |        |
|                                                                                                                                            |                    | \$                                                                  | , ,                                                                         | \$                                                  | 1300.00         |                                                                          |                                                             |        |
| Account number (see instructions)                                                                                                          |                    | l                                                                   | 14 Tax-exempt an                                                            |                                                     | <b>15</b> State | 16 State identification no.                                              | 17 State tax withh                                          | eld    |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                                                                                                    |                    | bond CUSIP no.                                                      |                                                                             | AA                                                  | 13-313997       | \$ 140                                                                   | 00.00                                                       |        |
| 154-49922-5                                                                                                                                |                    | cusipNumber                                                         |                                                                             |                                                     | 13-313///       | <del>                                    </del>                          | 0.00                                                        |        |
| - 4000 INT -                                                                                                                               | /I f               |                                                                     |                                                                             |                                                     |                 |                                                                          | Ψ                                                           |        |
| Form <b>1099-INT</b> (Rev. 1-2024)                                                                                                         | (keep for your rec | oras)                                                               | www.irs.gov/Form                                                            | 1099INT                                             | Depar           | tment of the Treasury                                                    | <ul> <li>Internal Revenue S</li> </ul>                      | ervice |