

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.

Reichert, Kuhlman and Brown
8755 Dee Creek
East Yuton, FL 53954
555-867-5309

PAYER'S TIN POLICYHOLDER'S TIN
00-0498291 000-10-8884

POLICYHOLDER'S name

Isreal Hermann

Street address (including apt. no.)

5837 Schaefer Underpass

City or town, state or province, country, and ZIP or foreign postal code

Port Damienland, VT 64040

Account number (see instructions) 4 Qualified contract
511-21422-9 (optional)

1 Gross long-term care benefits paid

\$ 200.00

2 Accelerated death benefits paid

\$ 300.00

3 Per diem Reimbursed amount

OMB No. 1545-1519

Form 1099-LTC

(Rev. April 2025)

For calendar year
2025

Long-Term Care and
Accelerated Death
Benefits

Copy B

For Policyholder

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.

INSURED'S TIN
insuredId

INSURED'S name

Stiedemann-Collier

Street address (including apt. no.)

5676 Emmerich Station

City or town, state or province, country, and ZIP or foreign postal code

Bartolettibury, NE 92245

5 (optional) Chronically ill Date certified
 Terminally ill 03/28/2025

Form 1099-LTC (Rev. 4-2025)

(keep for your records)

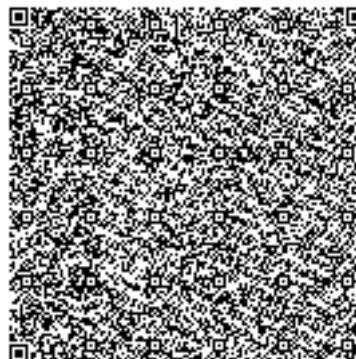
www.irs.gov/Form1099LTC

Department of the Treasury - Internal Revenue Service

QR CODE WITH TAX DOCUMENT DATA

The Financial Data Exchange standards-setting organization defines the use of QR codes for US Tax data.

For more information about how this code can be used visit:
<https://financialdataexchange.org/us-tax>



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 FINANCIAL
DATA EXCHANGE