



Tax Document  
QR Code  
Specification

*Version 2024.0  
June 2024*



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# Revision History

Document Version	Notes	Date
<b>2024.0</b>	Updated legal notice, general updates and corrections.	June 2024
<b>2023.0</b>	Updates for using QR Code to transmit Basic Auth credentials.	December 2023
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# Contents

<b>INTRODUCTION</b>	<b>6</b>
TAXPAYER BENEFITS	6
TAX AND FINANCIAL INDUSTRY BENEFITS	6
<b>AUDIENCE</b>	<b>7</b>
TAX DOCUMENT ISSUERS	7
TAX INFORMATIONAL STATEMENTS	8
<b>SHARING TAX DATA THROUGH QR CODES</b>	<b>9</b>
QR CODE WORKFLOW	9
FDX QR CODE FRAMING IMAGE	10
DOCUMENT ISSUER IMPLEMENTATION STEPS	11
TAX SOFTWARE IMPLEMENTATION	11
EXAMPLE FOR IRS FORM 1098, MORTGAGE INTEREST STATEMENT	12
USING QR CODE FOR BASIC AUTH APIs	14
<b>APPENDIX 1: SAMPLE CODE FOR JAVA DEVELOPERS</b>	<b>16</b>
Step 2, Create an instance of FDX TaxDataForQR class .....	16
Step 3, Serialize the object to JSON .....	16
Step 4, Convert the JSON string to a QR code image .....	17
Important Note .....	18
<b>APPENDIX 2: EXAMPLE TAX DOCUMENTS</b>	<b>19</b>
Form 1097-BTC, Bond Tax Credit .....	20
Form 1098, Mortgage Interest Statement .....	21
Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes .....	22
Form 1098-E, Student Loan Interest Statement .....	24
Form 1098-MA, Mortgage Assistance Payments .....	25
Form 1098-Q, Qualifying Longevity Annuity Contract Information .....	26
Form 1098-T, Tuition Statement .....	27
Form 1099-A, Acquisition or Abandonment of Secured Property .....	28
Form 1099-B, Proceeds From Broker and Barter Exchange Transactions .....	29
Form 1099-C, Cancellation of Debt .....	30
Form 1099-DIV, Dividends and Distributions .....	31
Form 1099-G, Certain Government Payments .....	32
Form 1099-H, Health Coverage Tax Credit (HCTC) Advance Payments .....	33
Form 1099-INT, Interest Income .....	34
Form 1099-K, Merchant Card and Third-Party Network Payments .....	35
Form 1099-LS, Reportable Life Insurance Sale .....	36
Form 1099-LTC, Long-Term Care and Accelerated Death Benefits .....	37
Form 1099-MISC, Miscellaneous Income .....	38
Form 1099-NEC, Nonemployee Compensation .....	39
Form 1099-OID, Original Issue Discount .....	40
Form 1099-PATR, Taxable Distributions Received From Cooperatives .....	41
Form 1099-Q, Payments From Qualified Education Programs .....	42
Form 1099-QA, Distributions From ABLE Accounts .....	43



<i>Form 1099-R, Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs,... etc...</i>	44
<i>Form 1099-S, Proceeds From Real Estate Transactions.....</i>	45
<i>Form 1099-SA, Distributions From an HSA, Archer MSA, or Medicare Advantage MSA.....</i>	46
<i>Form 1099-SB, Seller's Investment in Life Insurance Contract.....</i>	47
<i>Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains.....</i>	48
<i>Form 3921, Exercise of an Incentive Stock Option Under Section 422(b) .....</i>	49
<i>Form 3922, Transfer of Stock Acquired Through an Employee Stock Purchase Plan .....</i>	50
<i>Form 5498, IRA Contribution Information.....</i>	51
<i>Form 5498-ESA, Coverdell ESA Contribution Information.....</i>	52
<i>Form 5498-QA, ABLE Account Contribution Information .....</i>	53
<i>Form 5498-SA, HSA, Archer MSA, or Medicare Advantage MSA Information.....</i>	54
<i>Form W-2, Wage and Tax Statement.....</i>	55
<i>Form W-2G, Certain Gambling Winnings.....</i>	56
<i>Form W-2G, Certain Gambling Winnings.....</i>	58
<i>Form 1042-S Foreign Person's US Source Income Subject to Withholding.....</i>	59
<i>Form 1041 Schedule K1 .....</i>	61
<i>Form 1065 Schedule K1 .....</i>	63
<i>Form 1120-S Schedule K1 .....</i>	65

# Introduction

One of the goals of the Financial Data Exchange organization is to define standards and encourage practices that improve the experience of consumers in the management of their financial data. Each year consumers must manage the receipt of annual tax documents and use the data in those documents in the preparation of income tax returns.

This document defines a simple mechanism to support taxpayers' tax data management based on the commonly used barcode standard of QR codes.

## Taxpayer benefits

Taxpayer benefits include:

- Eliminating data entry errors in the income tax return preparation process
- Reducing time spent in tax preparation
- Using either paper or digital (PDF) forms

## Tax and financial industry benefits

Tax and financial industry benefits include:

- Reduced programming costs of simpler systems
- Eliminating the use of Optical Character Recognition (OCR) technology
- Increased success rate of tax document scanning versus OCR
- A simpler mechanism for tax document issuers to integrate with tax software:
  - Taxpayer consent is implicit through their action, no need to capture and store their credentials or consents
  - Technology connections to industry partners not needed
  - Full-fledged API services consuming or providing data also not needed

# Audience

This document defines a simple mechanism which the tax industry can use to support taxpayers' tax data management. The intended audiences are:

- Tax Document Issuers: Organizations which have IRS-mandated requirements to deliver tax documents to taxpayers, or offer other financial information statements for taxpayer convenience
- Tax Software Companies: Builders of applications which use data from tax documents or informational statements to prepare tax returns

The IRS hosts information on the various tax information forms which must be sent to taxpayers at <https://www.irs.gov/instructions/i1099gi>.

## Tax Document Issuers

Examples of organizations and some of the tax documents which they issue:

- Banks – 1099-INT, 1099-DIV, 1099-OID, 1099-B
- Lenders – 1098, 1098-E, 1099-A, 1099-C
- Brokerage houses – 1099-INT, 1099-DIV, 1099-OID, 1099-B, 1097-BTC
- Insurance companies – 1095-A, 1095-B, 1095-C
- Corporations – 2439, 3921, 3922, 1099-DIV, 1099-MISC, 1099-NEC
- Employers – W-2's, 1099-MISC, 1099-NEC
- Government agencies – 1099-G, 1099-Q
- Payroll providers – W-2's
- Universities – 1098-T
- Partnerships – 1065 K-1
- Escrow companies – 1099-S
- Trusts – 1041 K-1
- Cooperatives – 1099-PATR
- Payment card providers – 1099-K
- Pension plans – 1099-R
- IRA trustees – 1099-R, 5498

# Tax Informational Statements

The FDX U.S. Tax specification and QR Codes also provide support for informational statements of income and expense for these additional activities:

- Farms – Farm Income Statement (for IRS Schedule F), Farm Rental Statement (for IRS Form 4835)
- Real Estate management companies – Rental Income Statement (for IRS Schedule E)
- Oil & Gas industry – Royalty Income Statement (for IRS Schedule E)
- Small Businesses – Business Income Statement (for IRS Schedule C)

# Sharing Tax Data through QR Codes

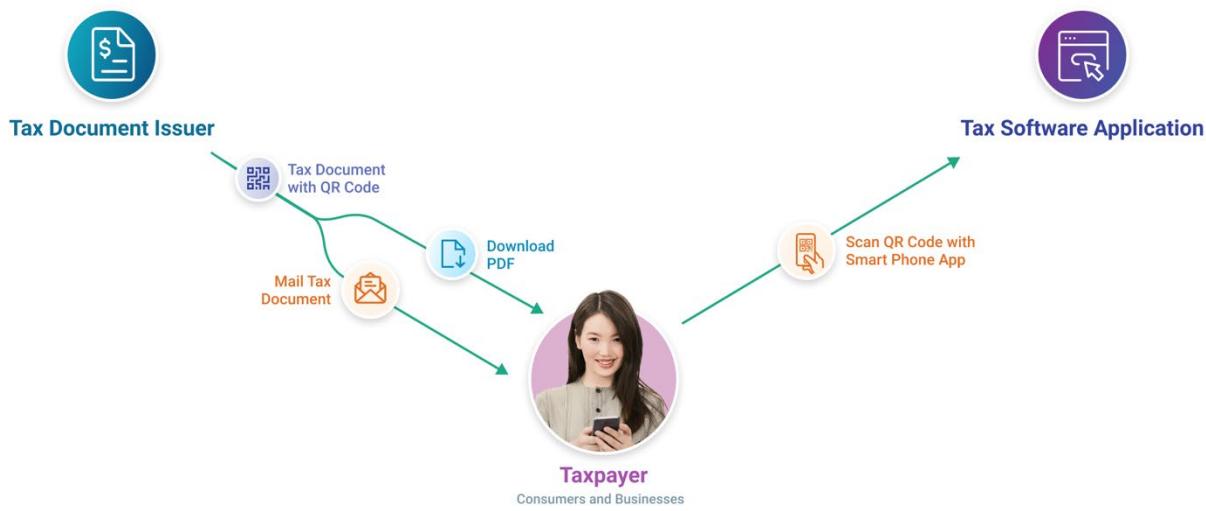
The QR codes standard for two-dimensional bar codes defines how to store information as a series of pixels in a square-shaped grid. This information can be quickly retrieved using computer devices such as smart phones. This specification outlines:

- How issuers of annual tax documents can encode document data in FDX JSON format as QR codes
- How tax software and smart phone applications can retrieve that data and submit it for inclusion in income tax returns of individuals and small businesses.

For more information on QR Codes, see [https://en.wikipedia.org/wiki/QR\\_code](https://en.wikipedia.org/wiki/QR_code).

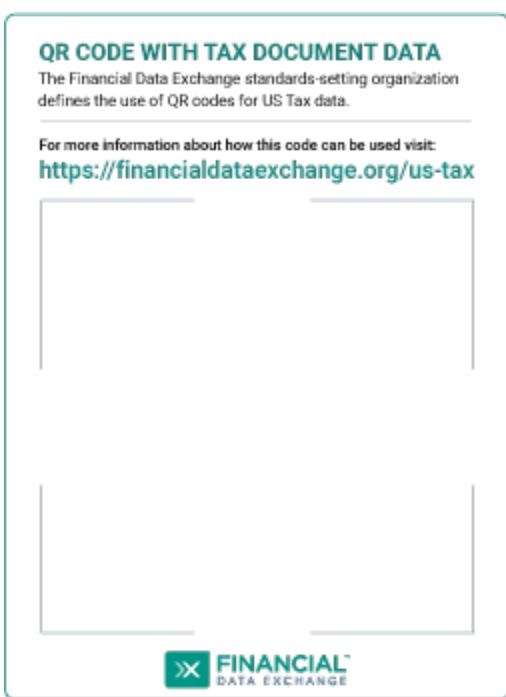
## QR Code Workflow

This diagram illustrates the workflow.



# FDX QR Code Framing Image

Financial Data Exchange has designed these images to frame any tax data QR codes. They will provide the information taxpayers need to understand why their tax form now has a QR code and where they can go to get additional information. The images provide a 3" area which leaves a quarter-inch whitespace border around QR codes up to 2-1/2" square (the maximum size defined for QR codes). But they can be scaled down for smaller size QR codes as long as a quarter-inch whitespace border remains. They are available at the displayed URL (<https://financialdataexchange.org/us-tax>) in bitmap .png, vector graphic .ai and .pdf file formats to support your technology choice. They are provided in both horizontal and vertical layouts as shown here, for better fit on various tax forms.



# Document Issuer Implementation Steps

Adding QR codes to annual tax documents or informational statements involves the following steps:

1. Download one of the FDX QR code framing images from  
<https://financialdataexchange.org/us-tax>
2. Collect the document data and convert it to a Financial Data Exchange (FDX) JSON instance of TaxDataForQR entity
3. Convert the TaxDataForQR instance into a QR code image using standard software libraries (see Appendix 1: Sample Code for Java Developers)
4. Merge the QR code into the FDX framing image
5. Place the combined image in an available location on the tax document or statement
  - If a given IRS form fills an entire page, then its QR code might require using space on a cover page or addendum, for examples see Appendix 2: Example Tax Documents

The full FDX specifications and JSON schemas, including this document, are available from [FinancialDataExchange.org](https://FinancialDataExchange.org). FDX content is free to non-member organizations by registering at <https://financialdataexchange.org/FDX/Membership/API-Access-Only/FDX/Membership/Join-FDX.aspx>.

# Tax Software Implementation

Importing and using the tax data from a taxpayer's QR codes has these steps:

1. Taxpayer signs into or downloads a tax software application
2. Tax software application identifies the taxpayer's device
3. Scanning feature of the tax software application scans for a QR code
  - a. If application detects a Basic Auth id and passcode in the QR code as described below in *Using QR Code for Basic Auth APIs*.
  - b. Then application uses id and passcode to retrieve the tax data from the tax form provider's API servers.
4. Application imports the scanned tax data securely to the taxpayer's income tax return

There is considerable additional educational information, detail and examples available at <https://www.taxdataexchange.org/>.

# Example for IRS Form 1098, Mortgage Interest Statement

Here is an example (with mock data) of a Form 1098 that could be delivered to a taxpayer, either printed or as a PDF, showing how its QR code could appear in whitespace near the mailing label. Many more such examples are included in Appendix 2: Example Tax Documents.

CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB No. 1545-1380  Form <b>1098</b> (Rev. January 2022)  For calendar year <u>20_23</u>
RECIPIENT'S/LENDER'S TIN  <b>12-3456789</b>	PAYER'S/BORROWER'S TIN  <b>xxx-xx-1234</b>	1 Mortgage interest received from payer(s)/borrower(s)* <b>\$ 1008.00</b>	<p style="text-align: center;"><b>Mortgage Interest Statement</b></p> <p><b>Copy B</b> <b>For Payer/ Borrower</b> The information in boxes 1 through 9 and 11 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 the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.</p> <p><b>11 Mortgage acquisition date</b> <b>11/15/2022</b></p>
PAYER'S/BORROWER'S name  <b>Kris Q Public</b>		2 Outstanding mortgage principal <b>\$ 200900.00</b>	
Street address (including apt. no.)  <b>1 Main St</b>		3 Mortgage origination date <b>03/10/2022</b>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		4 Refund of overpaid interest <b>\$ 4011.00</b>	
9 Number of properties securing the mortgage  <b>9</b>	10 Other  <b>10. Property tax: \$10,017.00</b>	5 Mortgage insurance premiums <b>\$ 5012.00</b>	
Account number (see instructions)  <b>111-23456</b>		6 Points paid on purchase of principal residence <b>\$ 6013.00</b>	
		7 <input checked="" type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.	
		8 Address or description of property securing mortgage	

Form **1098** (Rev. 1-2022) (Keep for your records) www.irs.gov/Form1098 Department of the Treasury - Internal Revenue Service



## QR code JSON for above IRS Form 1098 using FDX API v6.0

```
{
  "version": "V6.0.0",
  "softwareId": "FdxBankSoftware-2024",
  "tax1098": {
    "taxYear": 2023,
    "taxFormId": "ID-09990111-1098",
    "taxFormDate": "2024-02-15",
    "taxFormType": "Tax1098",
    "issuer": {
      "tin": "12-3456789",
      "partyType": "BUSINESS",
      "businessName": {
        "name1": "Financial Intelligence Associates"
      },
      "address": {
        "line1": "12022 Sundown Valley Dr",
        "line2": "Suite 230",
        "city": "Reston",
        "region": "VA",
        "postalCode": "20191",
        "country": "US"
      },
      "phone": {
        "number": "8885551212"
      }
    },
    "recipient": {
      "tin": "xxx-xx-1234",
      "partyType": "INDIVIDUAL",
      "individualName": {
        "first": "Kris",
        "middle": "Q",
        "last": "Public"
      },
      "address": {
        "line1": "1 Main St",
        "city": "Melrose",
        "region": "NY",
        "postalCode": "12121",
        "country": "US"
      }
    }
  }
}
```

```
        },
    },
    "mortgagedProperties": 9,
    "otherInformation": "10. Property tax: $10,017.00",
    "accountNumber": "111-23456",
    "mortgageInterest": 1008.0,
    "outstandingPrincipal": 200900.0,
    "originationDate": "2022-03-10",
    "overpaidRefund": 4011.0,
    "mortgageInsurance": 5012.0,
    "pointsPaid": 6013.0,
    "isPropertyAddressSameAsBorrowerAddress": true,
    "acquisitionDate": "2022-11-15",
    "propertyTax": 10017.0
}
}
```

## Using QR Code for Basic Auth APIs

When creating the recipient's copy of a tax form, the QR code can also be used to deliver the Document ID and Document Passcode used to retrieve full document data via a Basic Auth API. This mechanism would be needed to communicate tax forms whose data is too voluminous to fit in a QR code. For full details, see the Tax Document Alternate Authentication document included in the FDX API.

For a Basic Auth QR Code, generate JSON for the `BasicAuthForQR` entity containing the basic auth credentials as seen here:

```
{
    "basicAuth" : {
        "taxYear" : 2023,
        "taxFormType" : "Tax1099B",
        "id" : "00677560089990B1",
        "passcode" : "PK2Z-0QP-L6EF"
    },
    "version" : "V5.0",
    "softwareId" : "OakTreeSecurities"
}
```

This JSON is then encoded as a QR code and placed on a page of the recipient's copy of the tax document. The following is a horizontal example where the Tax Reporting Entity has added their own descriptive text above the image framing the QR code.

Oak Tree Securities  
implements electronic tax data import technologies defined by  
the Financial Data Exchange (FDX) organization.

You may scan the below QR code  
with your tax software smartphone app that supports this technology.

Using the encoded information,  
your tax software will securely retrieve your data from our server  
and import the data into your tax return.



# Appendix 1: Sample Code for Java Developers

Steps to add QR codes to your tax documents

1. Collect the data for the tax document from your database or file system
2. Create an instance of the Financial Data Exchange schema's TaxDataForQR class
3. Serialize the object to JSON
4. Convert the JSON string to a QR code image
5. Place the image in available space on your tax document or accompanying page

## Step 2, Create an instance of FDX TaxDataForQR class

Example code in Java:

```
TaxDataForQR taxData = new TaxDataForQR();
taxData.setVersion( FdxVersion.V6_0_0 ); // Version enum of FDX API
specification
taxData.setSoftwareId( "com.your-company" ); // Reverse domain name notation
TaxW2 form = new TaxW2();
// See FDX API and data structures documentation for properties of the tax form
// Populate the form data
taxData.setTaxW2( form );
```

## Step 3, Serialize the object to JSON

You may use the Jackson library available as a Maven dependency. Add the below to your project pom.xml file.

```
<properties>
    <jackson.version>2.11.3</jackson.version>
</properties>

<dependency>
    <groupId>com.fasterxml.jackson.core</groupId>
    <artifactId>jackson-core</artifactId>
    <version>${jackson.version}</version>
</dependency>
```

Add a function to convert the object to a JSON string.

```
public static String convert(
    TaxDataForQR taxDataForQR
) {
    String json = "";
    try {
        StringWriter sw = new StringWriter();
        ObjectMapper objectMapper = new ObjectMapper();
        // Indentation recommended but not required
        objectMapper.configure( SerializationFeature.INDENT_OUTPUT, true );
        // Do not include null values
        objectMapper.setSerializationInclusion( JsonInclude.Include.NON_NULL );
        objectMapper.writeValue( sw, taxDataForQR );
        json = sw.toString();
    } catch ( JsonGenerationException e ) {
        LOGGER.severe( e.getMessage() );
    } catch ( JsonMappingException e ) {
        LOGGER.severe( e.getMessage() );
    } catch ( IOException e ) {
        LOGGER.severe( e.getMessage() );
    }
    return json;
}
```

## Step 4, Convert the JSON string to a QR code image

The ZXing ("Zebra Crossing") barcode scanning library for Java is an open-source project at <https://github.com/zxing/zxing> and provides QR code generation functionality. Maven users can obtain the library by adding the below dependency to your project pom.xml file.

```
<properties>
    <zxing.version>3.4.1</zxing.version>
</properties>
<dependency>
    <groupId>com.google.zxing</groupId>
    <artifactId>core</artifactId>
    <version>${zxing.version}</version>
</dependency>
```

The library will create an image and place it into an output stream that you supply:

```
ByteArrayOutputStream outputStream = new ByteArrayOutputStream();
```

You specify the image format wanted. Here we assume PNG format.

```
String format = "png"; // or "jpg", if preferred
```

You then specify the preferred image size. The library will not return an image smaller than is necessary to hold the data to be encoded. Therefore, if you set the preferred width and height to 1 pixel, the minimum size image necessary to encode the json string will be generated

```
int preferredwidth = 1;  
int preferredHeight = 1;
```

Set the desired error correction level. It is our experience that a level of LOW is sufficient for this purpose. You do this by creating a "Hint" Map as seen here:

```
Map<EncodeHintType, Object> hintMap = new HashMap<>();  
hintMap.put(  
    EncodeHintType.ERROR_CORRECTION,  
    ErrorCorrectionLevel.L  
>;
```

Instantiate a QRCodeWriter object.

```
QRCodeWriter qrCodeWriter = new QRCodeWriter();
```

The object's encode method will create an object of type BitMatrix.

Important Note: If the json string is too large to fit in a QR code, an error will be thrown.

```
BitMatrix bitMatrix = qrCodeWriter.encode(  
    json,  
    BarcodeFormat.QR_CODE,  
    preferredwidth,  
    preferredHeight,  
    hintMap  
>;
```

The library's MatrixToImageWriter class has a writeToStream static method that will populate your output stream with the qr code image data.

```
MatrixToImageWriter.writeToStream(  
    bitMatrix,  
    format,  
    outputStream  
>;
```

Your output stream may be converted to a byte array.

```
byte[] imgData = outputStream.toByteArray();
```

You then place the image on your form in the location you specify.

## Important Note

Do not scale down the QR Code when adding to the printed or PDF document.

Doing so will remove pixels from the image and make it impossible to scan.

# Appendix 2: Example Tax Documents

These form images are from PDF files provided on the IRS web site. Your company might use approved facsimiles.

The examples assume the document will be folded in half and placed in a window envelope.

The QR code is placed in available whitespace which will not be visible through the envelope window.

(QR code visibility will not be an issue for tax documents delivered as PDF images, of course.)

# Form 1097-BTC, Bond Tax Credit

<input type="checkbox"/> CORRECTED (if checked)	
FORM 1097-BTC ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>	
1 Total  \$ <b>1007.00</b>	OMB No. 1545-2197  <b>Form 1097-BTC</b> (Rev. December 2019)
2a Code  <b>123-456-789</b>	For calendar year  20 <b>22</b>
2b Unique identifier  <b>guid-54321</b>	
3 Bond type  <b>BondType</b>	4
5a January  \$ <b>511.00</b>	5b February  \$ <b>496.00</b>
5c March  \$	5d April  \$
5e May  \$	5f June  \$
5g July  \$	5h August  \$
5i September  \$	5j October  \$
5k November  \$	5l December  \$
6 Comments  <b>6. Comments</b>	

**Bond  
Tax  
Credit**

**Copy B  
For Recipient**

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 an amount of tax credit exceeding the amount reported on this form is claimed on your income tax return.

Form **1097-BTC** (Rev. 12-2019) (keep for your records)

[www.irs.gov/Form1097BTC](http://www.irs.gov/Form1097BTC)

Department of the Treasury - Internal Revenue Service

*Sample*



# Form 1098, Mortgage Interest Statement

<input type="checkbox"/> CORRECTED (if checked)			
RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		<b>OMB No. 1545-1380</b> <b>Form 1098</b> <small>(Rev. January 2022)</small> For calendar year 20 <u>22</u>	
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		<b>*Caution:</b> The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	
		<b>1</b> Mortgage interest received from payer(s)/borrower(s)* <b>\$ 1008.00</b>	
RECIPIENT'S/LENDER'S TIN  12-3456789	PAYER'S/BORROWER'S TIN  xxx-xx-1234	<b>2</b> Outstanding mortgage principal <b>\$ 200900.00</b>	<b>3</b> Mortgage origination date <b>03/10/2022</b>
PAYER'S/BORROWER'S name  <b>Kris Q Public</b>		<b>4</b> Refund of overpaid interest <b>\$ 4011.00</b>	<b>5</b> Mortgage insurance premiums <b>\$ 5012.00</b>
Street address (including apt. no.)  <b>1 Main St</b>		<b>6</b> Points paid on purchase of principal residence <b>\$ 6013.00</b>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		<b>7</b> <input checked="" type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.	
9 Number of properties securing the mortgage  9	10 Other  <b>10. Property tax: \$10,017.00</b>	<b>8</b> Address or description of property securing mortgage  <i>Sample</i>	
Account number (see instructions)  <b>111-23456</b>		<b>11</b> Mortgage acquisition date  <b>11/15/2022</b>	

Form 1098 (Rev. 1-2022)

(Keep for your records)

[www.irs.gov/Form1098](http://www.irs.gov/Form1098)

Department of the Treasury - Internal Revenue Service

## Mortgage Interest Statement

### Copy B For Payer/ Borrower

The information in boxes 1 through 9 and 11 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 the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.

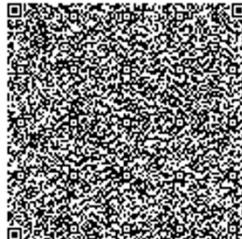
**11** Mortgage acquisition date

**11/15/2022**

### 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>



**FINANCIAL**  
DATA EXCHANGE

# Form 1098-C, Contributions of Motor Vehicles, Boats, and Airplanes

2022 Tax Information

Sample



CORRECTED (if checked)

Attachment Sequence No. 155A

DONEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		1 Date of contribution  01/05/2022	OMB No. 1545-1959  Form <b>1098-C</b> (Rev. November 2019)	<b>Contributions of Motor Vehicles, Boats, and Airplanes</b>
		2a Odometer mileage  2106	For calendar year  20 <u>22</u>	
DONEE'S TIN  12-3456789	DONOR'S TIN  xxx-xx-1234	2b Year  2007	2c Make  Ford	2d Model  Escape
3 Vehicle or other identification number  3VIN123456789VIN10				
DONOR'S name  <b>Kris Q Public</b>		4a <input checked="" type="checkbox"/> Donee certifies that vehicle was sold in arm's length transaction to unrelated party		
Street address (including apt. no.)  1 Main St		4b Date of sale  04/12/2022		
City or town, state or province, country, and ZIP or foreign postal code  Melrose, NY 12121		4c Gross proceeds from sale (see instructions)  \$ 4313.00		
5a <input checked="" type="checkbox"/> Donee certifies that vehicle will not be transferred for money, other property, or services before completion of material improvements or significant intervening use				
5b <input type="checkbox"/> Donee certifies that vehicle is to be transferred to a needy individual for significantly below fair market value in furtherance of donee's charitable purpose				
5c Donee certifies the following detailed description of material improvements or significant intervening use and duration of use  <b>5c. 16, Description of improvements</b>				
6a Did you provide goods or services in exchange for the vehicle? . . . . . ► Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
6b Value of goods and services provided in exchange for the vehicle  \$ 6218.00				
6c Describe the goods and services, if any, that were provided. If this box is checked, donee certifies that the goods and services consisted solely of intangible religious benefits . . . . . ► <input type="checkbox"/>  <b>6c. 20, Description Of Goods</b>				
7 Under the law, the donor may not claim a deduction of more than \$500 for this vehicle if this box is checked . . . . . ► <input checked="" type="checkbox"/>				

**Copy B**

**For Donor**

In order to take a deduction of more than \$500 for this contribution, you must attach this copy to your federal tax return.

**Unless box 5a or 5b is checked, your deduction cannot exceed the amount in box 4c.**

Form **1098-C** (Rev. 11-2019)

[www.irs.gov/Form1098C](http://www.irs.gov/Form1098C)

Department of the Treasury - Internal Revenue Service

# Form 1098-E, Student Loan Interest Statement

		<input type="checkbox"/> CORRECTED (if checked)	
RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212			OMB No. 1545-1576  <b>2022</b> Form 1098-E
RECIPIENT'S TIN <b>12-3456789</b>	BORROWER'S TIN <b>xxx-xx-1234</b>	1 Student loan interest received by lender \$ <b>1006.00</b>	<b>Copy B For Borrower</b>  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 the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
BORROWER'S name  <b>Kris Q Public</b>			
Street address (including apt. no.)  <b>1 Main St</b>			
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>			
Account number (see instructions)  <b>111-55555555</b>		2 If checked, box 1 does <b>not</b> include loan origination fees and/or capitalized interest for loans made before September 1, 2004 <input checked="" type="checkbox"/>	
Form 1098-E (keep for your records)      www.irs.gov/Form1098E      Department of the Treasury - Internal Revenue Service			

Sample



# Form 1098-MA, Mortgage Assistance Payments

<input type="checkbox"/> CORRECTED (if checked)		
FILER'S name, street address, city, state, ZIP code, and telephone no. <b>Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212</b>		OMB No. 1545-2221 <b>Form 1098-MA</b> (Rev. September 2019) For calendar year 20 <u>22</u>
FILER'S TIN <b>12-3456789</b>	HOMEOWNER'S TIN <b>xxx-xx-1234</b>	1. Total State HFA and homeowner mortgage payments \$ <b>10000.00</b>
HOMEOWNER'S name <b>Kris Q Public</b>		2. State HFA mortgage assistance payments \$ <b>2500.00</b>
Street address (including apt. no.) (optional) <b>1 Main St</b>		3. Homeowner mortgage payments \$ <b>7500.00</b>
City, state, and ZIP code (optional) <b>Melrose, NY 12121</b>		
Account number (optional) <b>111-55555555</b>		

Form **1098-MA** (Rev. 9-2019)

(keep for your records)

[www.irs.gov/Form1098MA](http://www.irs.gov/Form1098MA)

Department of the Treasury - Internal Revenue Service

## Mortgage Assistance Payments

### Copy B For Homeowner

This is important tax information and is being furnished to the IRS.

Sample



# Form 1098-Q, Qualifying Longevity Annuity Contract Information

<input type="checkbox"/> CORRECTED (if checked)			
ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		ISSUER'S TIN <b>12-3456789</b>	OMB No. 1545-2234
Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		PARTICIPANT'S TIN <b>xxx-xx-1234</b>	Form <b>1098-Q</b> (Rev. December 2019)
		<b>1a</b> Annuity amount on start date \$ <b>8000.00</b>	For calendar year 20 <b>22</b>
		<b>1b</b> Annuity start date <b>07/01/2022</b>	<b>2</b> If checked, start date may be accelerated <input checked="" type="checkbox"/>
		<b>3</b> Total premiums \$ <b>35000.00</b>	<b>4</b> FMV of QLAC \$ <b>48000.00</b>
PARTICIPANT'S name <b>Kris Q Public</b>		<b>5a</b> January dd \$ <b>400.00</b> <b>10</b>	<b>5b</b> February dd \$ <b>400.00</b> <b>10</b>
Street address (including apt. no.) <b>1 Main St</b>		<b>5c</b> March dd \$ <b>400.00</b> <b>10</b>	<b>5d</b> April dd \$ <b>400.00</b> <b>10</b>
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		<b>5e</b> May dd \$ <b>400.00</b> <b>10</b>	<b>5f</b> June dd \$ <b>400.00</b> <b>10</b>
Account number (see instructions) <b>111-55555555</b>		<b>5g</b> July dd \$ <b>400.00</b> <b>10</b>	<b>5h</b> August dd \$ <b>400.00</b> <b>10</b>
		<b>5i</b> September dd \$ <b>400.00</b> <b>10</b>	<b>5j</b> October dd \$ <b>400.00</b> <b>10</b>
		<b>5k</b> November dd \$ <b>400.00</b> <b>10</b>	<b>5l</b> December dd \$ <b>400.00</b> <b>10</b>
Name of plan <b>AAA QLAC Plans 4</b>	Plan sponsor's EIN <b>44-12345467</b>		

Form **1098-Q** (Rev. 12-2019)

(Keep for your records)

[www.irs.gov/Form1098Q](http://www.irs.gov/Form1098Q)

Department of the Treasury - Internal Revenue Service

## Qualifying Longevity Annuity Contract Information

### Copy B For Participant

This information is being furnished to the IRS.

#### 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>



 FINANCIAL  
DATA EXCHANGE

# Form 1098-T, Tuition Statement

CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 Payments received for qualified tuition and related expenses  \$ 14000.00 2	OMB No. 1545-1574  <b>2022</b>  Form 1098-T
FILER'S employer identification no. <b>12-3456789</b>	STUDENT'S TIN <b>XXX-XX-1234</b>	3	<b>Copy B For Student</b>  This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
STUDENT'S name <b>Kris Q. Public</b>		4 Adjustments made for a prior year  \$ 2000.00	
Street address (including apt. no.) <b>1 Main St</b>		5 Scholarships or grants  \$ 3000.00	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		6 Adjustments to scholarships or grants for a prior year  \$ 400.00	
Service Provider/Acct. No. (see instr.) <b>123-1234567</b>	8 Checked if at least half-time student <input checked="" type="checkbox"/>	7 Checked if the amount in box 1 includes amounts for an academic period beginning January–March 2023 <input checked="" type="checkbox"/>  9 Checked if a graduate student <input checked="" type="checkbox"/>	
		10 Ins. contract reimb./refund  \$ 50.00	

Form 1098-T

(keep for your records)

[www.irs.gov/Form1098T](http://www.irs.gov/Form1098T)

Department of the Treasury - Internal Revenue Service

Sample



# Form 1099-A, Acquisition or Abandonment of Secured Property

		<input type="checkbox"/> CORRECTED (if checked)	
LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0877 <b>Form 1099-A</b> (Rev. January 2022) For calendar year 20 <u>22</u>	
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		<b>Acquisition or Abandonment of Secured Property</b>	
LENDER'S TIN <b>12-3456789</b>	BORROWER'S TIN <b>xxx-xx-1234</b>	<b>1</b> Date of lender's acquisition or knowledge of abandonment  <b>04/01/2022</b>	<b>2</b> Balance of principal outstanding  <b>\$ 200000.00</b>
BORROWER'S name  <b>Kris Q Public</b>		<b>3</b>	<b>4</b> Fair market value of property  <b>\$ 140000.00</b>
Street address (including apt. no.)  <b>1 Main St</b>		<b>5</b> If checked, the borrower was personally liable for repayment of the debt <input checked="" type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		<b>6</b> Description of property  <b>Unimproved land</b>	
Account number (see instructions)  <b>111-55555555</b>			

Form **1099-A** (Rev. 1-2022)

(keep for your records)

www.irs.gov/Form1099A

Department of the Treasury - Internal Revenue Service

## Copy B For Borrower

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 taxable income results from this transaction and the IRS determines that it has not been reported.

Sample



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

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		Applicable checkbox on Form 8949	OMB No. 1545-0715 <b>2022</b> Form <b>1099-B</b>
Financial Intelligence Associates 12022 Sundown Valley Dr Reston, VA 20191		A	Proceeds From Broker and Barter Exchange Transactions
<b>1a</b> Description of property (Example: 100 sh. XYZ Co.) <b>TODO: Create example details for different transactions and adjustments</b>			
<b>1b</b> Date acquired  <b>Various</b>		<b>1c</b> Date sold or disposed  <b>12/01/2022</b>	
<b>PAYER'S TIN</b>  <b>12-3456789</b>		<b>RECIPIENT'S TIN</b>  <b>XXX-XX-1234</b>	
<b>1d</b> Proceeds  <b>\$ 1400.00</b>			
<b>1f</b> Accrued market discount  <b>\$ 0.00</b>			
<b>1g</b> Wash sale loss disallowed  <b>\$ 140.00</b>			
<b>2</b> Short-term gain or loss <input type="checkbox"/> Long-term gain or loss <input checked="" type="checkbox"/> Ordinary <input checked="" type="checkbox"/>			
<b>3</b> If checked, proceeds from: Collectibles <input type="checkbox"/> QOF <input type="checkbox"/>			
<b>4</b> Federal income tax withheld  <b>\$</b>			
<b>5</b> If checked, noncovered security  <input type="checkbox"/>			
<b>6</b> Reported to IRS: Gross proceeds <input type="checkbox"/> Net proceeds <input checked="" type="checkbox"/>			
<b>7</b> If checked, loss is not allowed based on amount in 1d  <input type="checkbox"/>			
<b>8</b> Profit or (loss) realized in 2022 on closed contracts  <b>\$</b>			
<b>9</b> Unrealized profit or (loss) on open contracts—12/31/2021  <b>\$</b>			
<b>10</b> Unrealized profit or (loss) on open contracts—12/31/2022  <b>\$</b>			
<b>11</b> Aggregate profit or (loss) on contracts  <b>\$</b>			
<b>14</b> State name  <b>15</b> State identification no.  <b>16</b> State tax withheld		<b>12</b> If checked, basis reported to IRS  <input checked="" type="checkbox"/>	
<b>14</b> State name  <b>15</b> State identification no.  <b>16</b> State tax withheld		<b>13</b> Bartering  <input type="checkbox"/>	

Form **1099-B**

(Keep for your records)

[www.irs.gov/Form1099B](http://www.irs.gov/Form1099B)

Department of the Treasury - Internal Revenue Service

**Copy B**  
For Recipient

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 income is taxable and the IRS determines that it has not been reported.

Sample



# Form 1099-C, Cancellation of Debt

		<input type="checkbox"/> CORRECTED (if checked)	
CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of identifiable event <b>04/01/2022</b>	OMB No. 1545-1424
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		2 Amount of debt discharged <b>\$ 20000.00</b>	Form <b>1099-C</b> (Rev. January 2022)
		3 Interest, if included in box 2 <b>\$ 300.00</b>	For calendar year <b>20 22</b>
CREDITOR'S TIN <b>12-3456789</b>	DEBTOR'S TIN <b>xxx-xx-1234</b>	4 Debt description <b>Signature loan</b>	
DEBTOR'S name <b>Kris Q Public</b>		5 If checked, the debtor was personally liable for repayment of the debt <input checked="" type="checkbox"/>	
Street address (including apt. no.) <b>1 Main St</b>		6 Identifiable event code <b>F</b>	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		7 Fair market value of property <b>\$ 7000.00</b>	
Account number (see instructions) <b>111-5555555</b>			

**Cancellation of Debt**

**Copy B For Debtor**

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 taxable income results from this transaction and the IRS determines that it has not been reported.

Form **1099-C** (Rev. 1-2022)

(keep for your records)

[www.irs.gov/Form1099C](http://www.irs.gov/Form1099C)

Department of the Treasury - Internal Revenue Service

Sample



# Form 1099-DIV, Dividends and Distributions

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		<b>1a</b> Total ordinary dividends  \$ <b>1107.00</b>	OMB No. 1545-0110  Form <b>1099-DIV</b> (Rev. January 2022)
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		<b>1b</b> Qualified dividends  \$ <b>1208.00</b>	For calendar year  20 <b>21</b>
PAYER'S TIN  <b>12-3456789</b>		<b>2a</b> Total capital gain distr.  \$ <b>2109.00</b>	<b>2b</b> Unrecap. Sec. 1250 gain  \$ <b>2210.00</b>
RECIPIENT'S TIN  <b>xxx-xx-1234</b>		<b>2c</b> Section 1202 gain  \$ <b>2311.00</b>	<b>2d</b> Collectibles (28%) gain  \$ <b>2412.00</b>
RECIPIENT'S name  <b>Kris Q Public</b>		<b>2e</b> Section 897 ordinary dividends  \$ <b>2512.40</b>	<b>2f</b> Section 897 capital gain  \$ <b>2612.80</b>
Street address (including apt. no.)  <b>1 Main St</b>		<b>3</b> Nondividend distributions  \$ <b>3013.00</b>	<b>4</b> Federal income tax withheld  \$ <b>4014.00</b>
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		<b>5</b> Section 199A dividends  \$ <b>5015.00</b>	<b>6</b> Investment expenses  \$ <b>6016.00</b>
Account number (see instructions)  <b>111-5555555</b>		<b>7</b> Foreign tax paid  \$ <b>7017.00</b>	<b>8</b> Foreign country or U.S. possession  <b>Mexico</b>
		<b>9</b> Cash liquidation distributions  \$ <b>9019.00</b>	<b>10</b> Noncash liquidation distributions  \$ <b>10020.00</b>
		<b>11</b> FATCA filing requirement  <input type="checkbox"/>	<b>12</b> Exempt-interest dividends  \$ <b>11021.00</b>
		<b>14</b> State  <b>NY</b>	<b>13</b> Specified private activity bond interest dividends  \$ <b>12022.00</b>
		<b>15</b> State identification no.  <b>14-000023</b>	<b>16</b> State tax withheld  \$ <b>15023.00</b>

Form **1099-DIV** (Rev. 1-2022)

(keep for your records)

[www.irs.gov/Form1099DIV](http://www.irs.gov/Form1099DIV)

Department of the Treasury - Internal Revenue Service

## Dividends and Distributions

### Copy B For Recipient

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 income is taxable and the IRS determines that it has not been reported.

*Sample*



# Form 1099-G, Certain Government Payments

		<input type="checkbox"/> CORRECTED (if checked)		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation	OMB No. 1545-0120	
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		\$ <b>1000.00</b>	Form <b>1099-G</b>	
		2 State or local income tax refunds, credits, or offsets	(Rev. January 2022)	
		\$ <b>2000.00</b>	For calendar year 20 <b>22</b>	
PAYER'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>XXX-XX-1234</b>	3 Box 2 amount is for tax year <b>2019</b>	4 Federal income tax withheld <b>\$ 400.00</b>	
RECIPIENT'S name <b>Kris Q. Public</b>		5 RTAA payments <b>\$ 500.00</b>	6 Taxable grants <b>\$ 600.00</b>	
Street address (including apt. no.) <b>1 Main St</b>		7 Agriculture payments <b>\$ 700.00</b>	8 If checked, box 2 is trade or business income ► <input checked="" type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		9 Market gain <b>\$ 900.00</b>		
Account number (see instructions) <b>123-1234567</b>		10a State <b>CA</b>	10b State identification no. <b>123-12345</b>	11 State income tax withheld <b>\$ 110.00</b>

Form **1099-G** (Rev. 1-2022)

(keep for your records)

[www.irs.gov/Form1099G](http://www.irs.gov/Form1099G)

Department of the Treasury - Internal Revenue Service

## Certain Government Payments

### Copy B For Recipient

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 income is taxable and the IRS determines that it has not been reported.

Sample



# Form 1099-H, Health Coverage Tax Credit (HCTC) Advance Payments

		<input type="checkbox"/> CORRECTED (if checked)			
ISSUER'S/PROVIDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Amount of HCTC advance payments <b>\$ 3100.00</b>	OMB No. 1545-1813	Health Coverage Tax Credit (HCTC) Advance Payments	
Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191		2 No. of mos. of HCTC advance payments and reimbursement credits paid to you <b>12</b>	Form <b>1099-H</b> (Rev. December 2020)		
ISSUER'S/PROVIDER'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>xxx-xx-1234</b>	3 Jan. <b>\$ 100.00</b>	9 July <b>\$ 700.00</b>	<b>Copy B</b> <b>For Recipient</b> <p>This is important tax information and is being furnished to the IRS.</p>	
RECIPIENT'S name <b>Kris Q Public</b>		4 Feb. <b>\$ 200.00</b>	10 Aug. <b>\$ 800.00</b>		
Street address (including apt. no.) <b>1 Main St</b>		5 Mar. <b>\$ 300.00</b>	11 Sept. <b>\$ 900.00</b>		
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		6 Apr. <b>\$ 400.00</b>	12 Oct. <b>\$ 1000.00</b>		
		7 May <b>\$ 500.00</b>	13 Nov. <b>\$ 1100.00</b>		
		8 June <b>\$ 600.00</b>	14 Dec. <b>\$ 1200.00</b>		

Form **1099-H** (Rev. 12-2020)

(keep for your records)

[www.irs.gov/Form1099H](http://www.irs.gov/Form1099H)

Department of the Treasury - Internal Revenue Service

Sample



# Form 1099-INT, Interest Income

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		Payer's RTN (optional) <b>007007007</b>	OMB No. 1545-0112 <b>Form 1099-INT</b> (Rev. January 2022)	<b>Interest Income</b>	
		<b>1</b> Interest income  \$ <b>1008.00</b>	For calendar year 20 <u>22</u>		
		2 Early withdrawal penalty  \$ <b>2009.00</b>		<b>Copy B</b>  <b>For Recipient</b>	
		3 Interest on U.S. Savings Bonds and Treasury obligations  \$ <b>3010.00</b>			
RECIPIENT'S name  <b>Kris Q Public</b>  Street address (including apt. no.)  <b>1 Main St</b>		<b>4</b> Federal income tax withheld  \$ <b>4011.00</b>	<b>5</b> Investment expenses  \$ <b>5012.00</b>	<p>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 income is taxable and the IRS determines that it has not been reported.</p>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		<b>6</b> Foreign tax paid  \$ <b>6013.00</b>	<b>7</b> Foreign country or U.S. possession  <b>Canada</b>		
		<b>8</b> Tax-exempt interest  \$ <b>8015.00</b>	<b>9</b> Specified private activity bond interest  \$ <b>9016.00</b>		
		<b>10</b> Market discount  \$ <b>10017.00</b>	<b>11</b> Bond premium  \$ <b>11018.00</b>		
		<b>12</b> Bond premium on Treasury obligations  \$ <b>12019.00</b>	<b>13</b> Bond premium on tax-exempt bond  \$ <b>13020.00</b>		
Account number (see instructions)  <b>111-5555555</b>		<b>14</b> Tax-exempt and tax credit bond CUSIP no.  <b>CUSIP</b>	<b>15</b> State <b>NY</b>		<b>16</b> State identification no. <b>15-000022</b>
					<b>17</b> State tax withheld  \$ <b>17022.00</b>
					\$

Form 1099-INT (Rev. 1-2022)

(keep for your records)

[www.irs.gov/Form1099INT](http://www.irs.gov/Form1099INT)

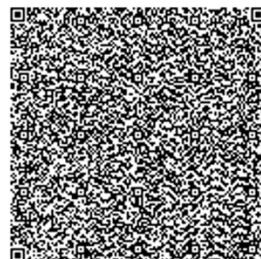
Department of the Treasury - Internal Revenue Service

*Sample*

## 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>



 FINANCIAL DATA EXCHANGE

# Form 1099-K, Merchant Card and Third-Party Network Payments

□ CORRECTED (if checked)			
FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		FILER'S TIN <b>12-3456789</b>	OMB No. 1545-2205
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		PAYEE'S TIN <b>xxx-xx-0123</b>	Form <b>1099-K</b> (Rev. January 2022)
		1a Gross amount of payment card/third party network transactions <b>\$ 6000.00</b>	For calendar year <b>20 22</b>
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input checked="" type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input checked="" type="checkbox"/>		Check to indicate transactions reported are: Payment card <input checked="" type="checkbox"/> Third party network <input checked="" type="checkbox"/>	<b>Payment Card and Third Party Network Transactions</b>
PAYEE's name <b>Kris Q Public</b> Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		1b Card Not Present transactions <b>\$ 2000.00</b>	2 Merchant category code <b>1731</b>
PSE's name and telephone number <b>PSE Associates 777-123-4567 x. 111</b>		3 Number of payment transactions <b>356.00</b>	4 Federal income tax withheld <b>\$ 400.00</b>
Account number (see instructions) <b>111-5555555</b>		5a January <b>\$ 100.00</b>	5b February <b>\$ 200.00</b>
		5c March <b>\$ 300.00</b>	5d April <b>\$ 400.00</b>
		5e May <b>\$ 500.00</b>	5f June <b>\$ 600.00</b>
		5g July <b>\$ 700.00</b>	5h August <b>\$ 800.00</b>
		5i September <b>\$ 900.00</b>	5j October <b>\$ 1000.00</b>
		5k November <b>\$ 1100.00</b>	5l December <b>\$ 1200.00</b>
		6 State <b>NY</b>	7 State identification no. <b>123-1234</b>
			8 State income tax withheld <b>\$ 10.00</b>

Form **1099-K** (Rev. 1-2022)

(Keep for your records)

[www.irs.gov/Form1099K](http://www.irs.gov/Form1099K)

Department of the Treasury - Internal Revenue Service

## Payment Card and Third Party Network Transactions

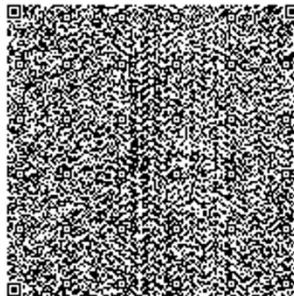
### Copy B For Payee

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 taxable income results from this transaction and the IRS determines that it has not been reported.

#### QR CODE WITH TAX DOCUMENT DATA

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<https://financialdataexchange.org/us-tax>



 **FINANCIAL**  
DATA EXCHANGE

# Form 1099-LS, Reportable Life Insurance Sale

<input type="checkbox"/> CORRECTED (if checked)			
ACQUIRER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Amount paid to payment recipient  \$ <b>1200.00</b>	OMB No. 1545-2281  Form <b>1099-LS</b> (Rev. December 2019)
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		2 Date of sale  <b>07/01/2022</b>	For calendar year  20 <b>22</b>
ACQUIRER'S TIN  <b>12-3456789</b>	PAYMENT RECIPIENT'S TIN  <b>xxx-xx-1234</b>	Issuer's name <b>R I Associates</b>	
PAYMENT RECIPIENT'S name <b>Kris Q Public</b> Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		Acquirer's information contact name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ACQUIRER) <b>J Q Public</b> <b>1 Main St</b> <b>Melrose, NY 12121</b>	
Policy number  <b>string</b>			

Form **1099-LS** (Rev. 12-2019)

(keep for your records)

[www.irs.gov/Form1099LS](http://www.irs.gov/Form1099LS)

Department of the Treasury - Internal Revenue Service

## Reportable Life Insurance Sale

### Copy B For Payment Recipient

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.

Sample



# Form 1099-LTC, Long-Term Care and Accelerated Death Benefits

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.  Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		1 Gross long-term care benefits paid  \$ <b>1000.00</b>	OMB No. 1545-1519  Form <b>1099-LTC</b> (Rev. October 2019)
PAYER'S TIN <b>12-3456789</b>	POLICYHOLDER'S TIN <b>xxx-xx-1234</b>	2 Accelerated death benefits paid  \$ <b>2000.00</b>	For calendar year 20 <b>22</b>
POLICYHOLDER'S name  <b>Kris Q Public</b>  Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		3 <input checked="" type="checkbox"/> Per diem <input checked="" type="checkbox"/> Reimbursed amount	INSURED'S TIN  <b>555-55-5555</b>
Account number (see instructions) <b>111-55555555</b>		4 Qualified contract <input checked="" type="checkbox"/> (optional)	5 (optional) <input checked="" type="checkbox"/> Chronically ill <input type="checkbox"/> Terminally ill   Date certified <b>04/01/2022</b>
Form <b>1099-LTC</b> (Rev. 10-2019)   (keep for your records) <a href="http://www.irs.gov/Form1099LTC">www.irs.gov/Form1099LTC</a> Department of the Treasury - Internal Revenue Service			

## Long-Term Care and Accelerated Death Benefits

### Copy B

#### For Policyholder

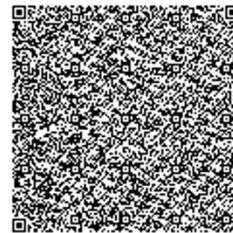
This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.

Sample

#### QR CODE WITH TAX DOCUMENT DATA

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 FINANCIAL DATA EXCHANGE

# Form 1099-MISC, Miscellaneous Income

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents  \$ <b>1007.00</b>	OMB No. 1545-0115  Form <b>1099-MISC</b> (Rev. January 2022)  For calendar year 20 <u>21</u>
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		2 Royalties  \$ <b>2008.00</b>	
		3 Other income  \$ <b>3009.00</b>	4 Federal income tax withheld  \$ <b>4010.00</b>
PAYER'S TIN  <b>12-3456789</b>	RECIPIENT'S TIN  <b>xxx-xx-1234</b>	5 Fishing boat proceeds  \$ <b>5011.00</b>	6 Medical and health care payments  \$ <b>6012.00</b>
RECIPIENT'S name  <b>Kris Q Public</b>		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale  <input checked="" type="checkbox"/>	8 Substitute payments in lieu of dividends or interest  \$ <b>8015.00</b>
Street address (including apt. no.)  <b>1 Main St</b>		9 Crop insurance proceeds  \$ <b>9016.00</b>	10 Gross proceeds paid to an attorney  \$ <b>10017.00</b>
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		11 Fish purchased for resale  \$ <b>12018.00</b>	12 Section 409A deferrals  \$ <b>12018.00</b>
		13 FATCA filing requirement  <input type="checkbox"/>	14 Excess golden parachute payments  \$ <b>13020.00</b>
Account number (see instructions)  <b>111-5555555</b>		15 Nonqualified deferred compensation  \$ <b>14021.00</b>	16 State tax withheld  \$ <b>15022.00</b>
		17 State/Payer's state no.  <b>NY/xxx-16022</b>	18 State income  \$ <b>17022.00</b>
\$ <b>15022.00</b>			

Form **1099-MISC** (Rev. 1-2022)

(keep for your records)

[www.irs.gov/Form1099MISC](http://www.irs.gov/Form1099MISC)

Department of the Treasury - Internal Revenue Service

## Miscellaneous Information

### Copy B For Recipient

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 income is taxable and the IRS determines that it has not been reported.

*Sample*



# Form 1099-NEC, Nonemployee Compensation

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		OMB No. 1545-0116	
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		Form <b>1099-NEC</b> <small>(Rev. January 2022)</small>	<b>Nonemployee Compensation</b>
		For calendar year 20 <u>21</u>	
PAYER'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>xxx-xx-1234</b>	<b>1 Nonemployee compensation</b> <b>\$ 1008.00</b>	
RECIPIENT'S name <b>Kris Q Public</b>		<b>2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale</b> <input type="checkbox"/>	
Street address (including apt. no.) <b>1 Main St</b>		<b>3</b>	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		<b>4 Federal income tax withheld</b> <b>\$ 4009.00</b>	
Account number (see instructions) <b>111-5555555</b>		<b>5 State tax withheld</b> <b>\$ 5010.00</b>	<b>6 State/Payer's state no.</b> <b>/xxx-123456</b>
		<b>7 State income</b> <b>\$ 7010.00</b>	
		\$	\$

Form **1099-NEC** (Rev. 1-2022) (keep for your records)

[www.irs.gov/Form1099NEC](http://www.irs.gov/Form1099NEC)

Department of the Treasury - Internal Revenue Service

Sample



# Form 1099-OID, Original Issue Discount

		<input type="checkbox"/> CORRECTED (if checked)	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Original issue discount for the year*	OMB No. 1545-0117
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		\$ <b>1007.00</b>	Form <b>1099-OID</b> (Rev. October 2019)
		* This may not be the correct figure to report on your income tax return. See instructions on the back.	
		2 Other periodic interest	For calendar year 20 <u>22</u>
		\$ <b>2008.00</b>	
PAYER'S TIN  <b>12-3456789</b>	RECIPIENT'S TIN  <b>xxx-xx-1234</b>	3 Early withdrawal penalty \$ <b>3009.00</b>	4 Federal income tax withheld \$ <b>4010.00</b>
RECIPIENT'S name  <b>Kris Q Public</b>  Street address (including apt. no.)  <b>1 Main St</b>		5 Market discount \$ <b>5011.00</b>	6 Acquisition premium \$ <b>6012.00</b>
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		7 Description  <b>7. 13, OID description</b>	
		8 Original issue discount on U.S. Treasury obligations* \$ <b>8014.00</b>	9 Investment expenses \$ <b>9015.00</b>
		10 Bond premium \$ <b>10016.00</b>	11 Tax-exempt OID \$ <b>11017.00</b>
Account number (see instructions)  <b>111-5555555</b>		12 State <b>NY</b>	13 State identification no. <b>12-000018</b>
		14 State tax withheld \$ <b>14018.00</b>	\$

Form **1099-OID** (Rev. 10-2019)

(keep for your records)

[www.irs.gov/Form1099OID](http://www.irs.gov/Form1099OID)

Department of the Treasury - Internal Revenue Service

## Original Issue Discount

Copy B

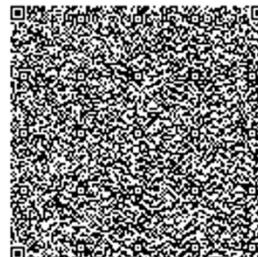
For Recipient

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 income is taxable and the IRS determines that it has not been reported.

### QR CODE WITH TAX DOCUMENT DATA

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<https://financialdataexchange.org/us-tax>



 FINANCIAL DATA EXCHANGE

# Form 1099-PATR, Taxable Distributions Received From Cooperatives

<input type="checkbox"/> CORRECTED (if checked)			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Patronage dividends \$ <b>10000.00</b>	OMB No. 1545-0118
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		2 Nonpatronage distributions \$ <b>2000.00</b>	<b>2022</b>
		3 Per-unit retain allocations \$ <b>3000.00</b>	Form 1099-PATR
PAYER'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>xxx-xx-1234</b>	4 Federal income tax withheld \$ <b>400.00</b>	5 Redeemed nonqualified notices \$ <b>500.00</b>
RECIPIENT'S name <b>Kris Q Public</b>		6 Section 199A(g) deduction \$ <b>700.00</b>	7 Qualified payments (Section 199A(b)(7)) \$ <b>700.00</b>
Street address (including apt. no.) <b>1 Main St</b>		8 Section 199A(a) qual. items \$ <b>800.00</b>	9 Section 199A(a) SSTB items \$ <b>900.00</b>
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		10 Investment credit \$ <b>800.00</b>	11 Work opportunity credit \$ <b>900.00</b>
Account number (see instructions) <b>111-5555555</b>		12 Other credits and deductions \$ <b>110.00</b>	13 Specified Coop <input type="checkbox"/>
<b>Form 1099-PATR</b> (keep for your records)      www.irs.gov/Form1099PATR      Department of the Treasury - Internal Revenue Service			

**Taxable  
Distributions  
Received From  
Cooperatives**

**Copy B  
For Recipient**

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 income is taxable and the IRS determines that it has not been reported.

Sample



# Form 1099-Q, Payments From Qualified Education Programs

		<input type="checkbox"/> CORRECTED (if checked)		Payments From Qualified Education Programs (Under Sections 529 and 530)
PAYER'S/TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross distribution	OMB No. 1545-1760	
Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		\$ 10000.00	Form 1099-Q (Rev. November 2019)	
		\$ 2000.00	For calendar year 20 22	
PAYER'S/TRUSTEE'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>xxx-xx-1234</b>	3 Basis \$ 3000.00	4 Trustee-to-trustee transfer <input checked="" type="checkbox"/>	
RECIPIENT'S name <b>Kris Q Public</b> Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		5 Distribution is from: <ul style="list-style-type: none"> <li>• Qualified tuition program— Private <input checked="" type="checkbox"/> or State <input type="checkbox"/></li> <li>• Coverdell ESA <input type="checkbox"/></li> </ul>	6 If this box is checked, the recipient is not the designated beneficiary <input checked="" type="checkbox"/>  If the fair market value (FMV) is shown below, see <b>Pub. 970</b> , Tax Benefits for Education, for how to figure earnings.	
Account number (see instructions) <b>111-55555555</b>				

Form 1099-Q (Rev. 11-2019) (keep for your records)

[www.irs.gov/Form1099Q](http://www.irs.gov/Form1099Q)

Department of the Treasury - Internal Revenue Service

Sample



# Form 1099-QA, Distributions From ABLE Accounts

<input type="checkbox"/> CORRECTED (if checked)			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross distribution  \$ 12000.00	OMB No. 1545-2262
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		2 Earnings  \$ 2400.00	<b>2022</b>
PAYER'S TIN  <b>12-3456789</b>	RECIPIENT'S TIN  <b>xxx-xx-1234</b>	3 Basis  \$ 6000.00	4 Program-to-program transfer <input checked="" type="checkbox"/>
RECIPIENT'S name  <b>Kris Q Public</b>		5 If checked, ABLE account terminated in 2022 <input checked="" type="checkbox"/>	6 If this box is checked, the recipient is not the designated beneficiary <input checked="" type="checkbox"/>
Street address (including apt. no.)  <b>1 Main St</b>			
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>			
Account number (see instructions)  <b>111-55555555</b>			

Form **1099-QA** (keep for your records)

[www.irs.gov/Form1099QA](http://www.irs.gov/Form1099QA)

Department of the Treasury - Internal Revenue Service

## Distributions From ABLE Accounts

### Copy B For Recipient

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 income is taxable and the IRS determines that it has not been reported.

Sample

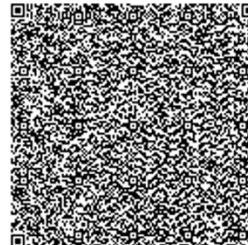


# Form 1099-R, Distributions from Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs,... etc.

		<input type="checkbox"/> CORRECTED (if checked)			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross distribution	OMB No. 1545-0119	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		\$ 100000.00	2022	Form 1099-R	
		2a Taxable amount			
		\$ 21000.00			
		2b Taxable amount not determined <input type="checkbox"/>	Total distribution <input checked="" type="checkbox"/>	Copy B	
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a)	4 Federal income tax withheld	Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return.	
12-3456789	xxx-xx-1234	\$ 3000.00	\$ 4000.00		
RECIPIENT'S name  Kris Q Public  Street address (including apt. no.)  1 Main St		5 Employee contributions/ Designated Roth contributions or insurance premiums	6 Net unrealized appreciation in employer's securities	This information is being furnished to the IRS.	
		\$ 5000.00	\$ 6000.00		
		7 Distribution code(s)  A	IR/ SEP/ SIMPLE  <input checked="" type="checkbox"/>	8 Other	%
		9a Your percentage of total distribution	%	9b Total employee contributions	\$ 9200.00
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	12 FATCA filing requirement <input type="checkbox"/>	14 State tax withheld	15 State/Payer's state no.	16 State distribution
\$ 1000.00	2012		\$ 1400.00	NY/State Id	\$ 16000.00
Account number (see instructions)  111-23456		13 Date of payment  04/01/2022	17 Local tax withheld	18 Name of locality	19 Local distribution
Form 1099-R      www.irs.gov/Form1099R      Department of the Treasury - Internal Revenue Service					

**QR CODE WITH TAX DOCUMENT DATA**  
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**FINANCIAL®**  
DATA EXCHANGE

# Form 1099-S, Proceeds From Real Estate Transactions

		<input type="checkbox"/> CORRECTED (if checked)	
FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Date of closing <b>04/01/2019</b>	OMB No. 1545-0997
<b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		2 Gross proceeds  \$ <b>200000.00</b>	Form <b>1099-S</b> (Rev. January 2022)  For calendar year <b>20 22</b>
FILER'S TIN <b>12-3456789</b>	TRANSFEROR'S TIN <b>xxx-xx-1234</b>	3 Address (including city, state, and ZIP code) or legal description <b>2 Main St, Melrose, NY 12121</b>	
TRANSFEROR'S name <b>Kris Q Public</b>  Street address (including apt. no.) <b>1 Main St</b>		4 Transferor received or will receive property or services as part of the consideration (if checked). <input checked="" type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) <input type="checkbox"/>	
Account number (see instructions) <b>111-23456</b>		6 Buyer's part of real estate tax  \$ <b>600.00</b>	

Form **1099-S** (Rev. 1-2022) (keep for your records) [www.irs.gov/Form1099S](http://www.irs.gov/Form1099S) Department of the Treasury - Internal Revenue Service

## Proceeds From Real Estate Transactions

### Copy B

#### For Transferor

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.

Sample



# Form 1099-SA, Distributions From an HSA, Archer MSA, or Medicare Advantage MSA

		<input type="checkbox"/> CORRECTED (if checked)	
TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		OMB No. 1545-1517 <b>1099-SA</b> (Rev. November 2019) For calendar year <b>20 22</b>	
PAYER'S TIN <b>12-3456789</b>	RECIPIENT'S TIN <b>xxx-xx-1234</b>	1 Gross distribution \$ <b>1000.00</b>	2 Earnings on excess cont. \$ <b>200.00</b>
RECIPIENT'S name  <b>Kris Q Public</b>		3 Distribution code  <b>A</b>	4 FMV on date of death \$ <b>400.00</b>
Street address (including apt. no.) <b>1 Main St</b>		5 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>			
Account number (see instructions) <b>111-23456</b>			

Form **1099-SA** (Rev. 11-2019) (keep for your records) www.irs.gov/Form1099SA Department of the Treasury - Internal Revenue Service

**Distributions  
From an HSA,  
Archer MSA, or  
Medicare Advantage  
MSA**

**Copy B  
For  
Recipient**

This information  
is being furnished  
to the IRS.

Sample



# Form 1099-SB, Seller's Investment in Life Insurance Contract

		<input type="checkbox"/> CORRECTED (if checked)	
ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Investment in contract	OMB No. 1545-2281
<b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b> <b>888-555-1212</b>		\$ <b>60000.00</b>	Form <b>1099-SB</b> (Rev. December 2019)
		2 Surrender amount	For calendar year
		\$ <b>45000.00</b>	20 <b>22</b>
ISSUER'S TIN <b>12-3456789</b>	SELLER'S TIN <b>xxx-xx-1234</b>	Issuer's information contact name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ISSUER)	
SELLER'S name <b>Kris Q Public</b> Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		<b>Kris Q Public</b> <b>1 Main St</b> <b>Melrose, NY 12121</b>	
Policy number <b>987-65-4321</b>			

Form **1099-SB** (Rev. 12-2019) (keep for your records) [www.irs.gov/Form1099SB](http://www.irs.gov/Form1099SB) Department of the Treasury - Internal Revenue Service

## Copy B

### For Seller

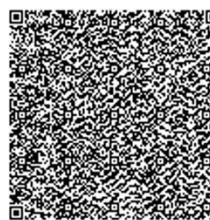
This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.

Sample

#### 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>



 FINANCIAL DATA EXCHANGE

# Form 2439, Notice to Shareholder of Undistributed Long-Term Capital Gains

<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		
Name, address, and ZIP code of RIC or REIT <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191	OMB No. 1545-0123  <b>Form 2439</b> (Rev. November 2021)	<b>Notice to Shareholder of Undistributed Long-Term Capital Gains</b> For calendar year 20 <b>22</b> , or other tax year of the regulated investment company (RIC) or the real estate investment trust (REIT) beginning _____, 20 _____, and ending _____, 20 _____
Identification number of RIC or REIT <b>12-3456789</b>	<b>1a</b> Total undistributed long-term capital gains <b>1100.00</b>	<b>Copy B</b> Attach to the shareholder's income tax return for the tax year that includes the last day of the RIC's or REIT's tax year.
Shareholder's identifying number <b>xxx-xx-1234</b>	<b>1b</b> Unrecaptured section 1250 gain <b>120.00</b>	
Shareholder's name, address, and ZIP code <b>Kris Q Public</b> 1 Main St Melrose, NY 12121	<b>1c</b> Section 1202 gain <b>130.00</b>	
	<b>1d</b> Collectibles (28%) gain <b>140.00</b>	
	<b>2</b> Tax paid by the RIC or REIT on the box 1a gains <b>200.00</b>	

Form 2439 (Rev. 11-2021)

[www.irs.gov/Form2439](http://www.irs.gov/Form2439)

Department of the Treasury - Internal Revenue Service

Sample



# Form 3921, Exercise of an Incentive Stock Option Under Section 422(b)

<input type="checkbox"/> CORRECTED (if checked)			
TRANSFEROR'S name, street address, city or town, state or province, country, and ZIP or foreign postal code  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191		1 Date option granted  <b>03/01/2022</b>	OMB No. 1545-2129  <b>Form 3921</b> (Rev. October 2017)
		2 Date option exercised  <b>07/01/2022</b>	<b>Exercise of an Incentive Stock Option Under Section 422(b)</b>
TRANSFEROR'S TIN <b>12-3456789</b>	EMPLOYEE'S TIN <b>xxx-xx-1234</b>	3 Exercise price per share  \$ <b>50.00</b>	4 Fair market value per share on exercise date  \$ <b>55.00</b>
EMPLOYEE'S name <b>Kris Q Public</b>		5 No. of shares transferred  <b>100.00</b>	<b>Copy B</b>  For Employee  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.
Street address (including apt. no.) <b>1 Main St</b>		6 If other than TRANSFEROR, name, address, and TIN of corporation whose stock is being transferred  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191	
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>			
Account number (see instructions)  <b>111-23456</b>			

Form **3921** (Rev. October 2017)

(keep for your records)

[www.irs.gov/Form3921](http://www.irs.gov/Form3921)

Department of the Treasury - Internal Revenue Service

Sample



# Form 3922, Transfer of Stock Acquired Through an Employee Stock Purchase Plan

<input type="checkbox"/> CORRECTED			
CORPORATION'S name, street address, city or town, state or province, country, and ZIP or foreign postal code  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 Date option granted  <b>04/01/2022</b>	OMB No. 1545-2129
		2 Date option exercised  <b>07/01/2022</b>	<b>Form 3922</b> (Rev. September 2016)
CORPORATION'S federal identification number  <b>12-3456789</b>	EMPLOYEE'S identification number  <b>xxx-xx-1234</b>	3 Fair market value per share on grant date  \$ <b>30.00</b>	4 Fair market value per share on exercise date  \$ <b>40.00</b>
EMPLOYEE'S name  <b>Kris Q Public</b>		5 Exercise price paid per share  \$ <b>25.00</b>	6 No. of shares transferred  <b>100.00</b>
Street address (including apt. no.)  <b>1 Main St</b>		7 Date legal title transferred  <b>07/15/2022</b>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		8 Exercise price per share determined as if the option was exercised on the date shown in box 1  \$ <b>26.00</b>	
Account number (see instructions)  <b>111-23456</b>			

Form **3922** (Rev. 9-2016) (keep for your records)

[www.irs.gov/form3922](http://www.irs.gov/form3922)

Department of the Treasury - Internal Revenue Service

**Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c)**

**Copy B**  
**For Employee**

This is important tax information and is being furnished to the Internal Revenue Service.

Sample



# Form 5498, IRA Contribution Information

		<input type="checkbox"/> CORRECTED (if checked)	
TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Suite 230 Reston, VA 20191 888-555-1212		1 IRA contributions (other than amounts in boxes 2-4, 8-10, 13a, and 14a)  \$ <b>1000.00</b>	OMB No. 1545-0747  <b>2022</b> Form 5498
TRUSTEE'S or ISSUER'S TIN  <b>12-3456789</b>		2 Rollover contributions  \$ <b>200.00</b>	IRA Contribution Information  Copy B  For Participant  This information is being furnished to the IRS.
PARTICIPANT'S TIN  <b>xxx-xx-1234</b>		3 Roth IRA conversion amount  \$ <b>300.00</b>	
PARTICIPANT'S name  <b>Kris Q Public</b>		4 Recharacterized contributions  \$ <b>400.00</b>	
Street address (including apt. no.)  <b>1 Main St</b>		5 FMV of account  \$ <b>5000.00</b>	6 Life insurance cost included in box 1  \$ <b>600.00</b>
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>		7 IRA <input checked="" type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Roth IRA <input type="checkbox"/>  \$ <b>800.00</b>	8 SEP contributions  \$ <b>900.00</b>
		10 Roth IRA contributions  \$ <b>1000.00</b>	11 If checked, required minimum distribution for 2023  <input checked="" type="checkbox"/>
		12a RMD date  <b>04/01/2022</b>	12b RMD amount  \$ <b>1220.00</b>
		13a Postponed/late contrib.  \$ <b>1310.00</b>	13b Year <b>2017</b> 13c Code <b>P</b>
		14a Repayments  \$ <b>141.00</b>	14b Code <b>A</b>
Account number (see instructions)  <b>12-3456789</b>		15a FMV of certain specified assets  \$ <b>151.00</b>	15b Code(s) <b>B</b>

Form **5498**

(keep for your records)

www.irs.gov/Form5498

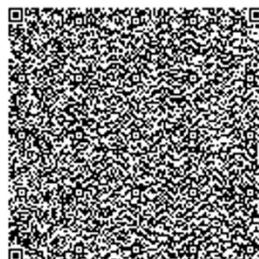
Department of the Treasury - Internal Revenue Service

Sample

## QR CODE WITH TAX DOCUMENT DATA

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



 FINANCIAL DATA EXCHANGE

# Form 5498-ESA, Coverdell ESA Contribution Information

<input type="checkbox"/> CORRECTED		
TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 Coverdell ESA contributions \$ <b>1000.00</b> OMB No. 1545-1815
		2 Rollover contributions \$ <b>2000.00</b>
		Form <b>5498-ESA</b>
TRUSTEE'S/ISSUER'S TIN <b>12-3456789</b>	BENEFICIARY'S TIN <b>XXX-XX-1234</b>	<p><b>Coverdell ESA Contribution Information</b></p> <p><b>Copy B For Beneficiary</b></p> <p>This information is being furnished to the IRS.</p>
BENEFICIARY'S name <b>Kris Q. Public</b>		
Street address (including apt. no.) <b>1 Main St</b>		
City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		
Account number (see instructions) <b>123-1234567</b>		

Form **5498-ESA**

(keep for your records)

[www.irs.gov/Form5498ESA](http://www.irs.gov/Form5498ESA)

Department of the Treasury - Internal Revenue Service

Sample



# Form 5498-QA, ABLE Account Contribution Information

CORRECTED			
ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 ABLE contributions  \$ <b>2000.00</b>	OMB No. 1545-2262
		2 ABLE to ABLE Rollovers  \$ <b>200.00</b>	<b>2022</b>
		Form <b>5498-QA</b>	
ISSUER'S TIN <b>12-3456789</b>	BENEFICIARY'S TIN <b>XXX-XX-1234</b>	3 Cumulative contributions  \$ <b>3500.00</b>	4 Fair market value  \$ <b>8000.00</b>
BENEFICIARY'S name  <b>Kris Q. Public</b>		5 If checked, account was opened in 2022 <input type="checkbox"/>	6 Basis of eligibility  <b>C</b>
Street address (including apt. no.)  <b>1 Main St</b>		7 Code  <b>6</b>	
City or town, state or province, country, and ZIP or foreign postal code  <b>Melrose, NY 12121</b>			
Account number (see instructions)  <b>123-1234567</b>			

Form **5498-QA**

(keep for your records)

[www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA)

Department of the Treasury - Internal Revenue Service

## ABLE Account Contribution Information

### Copy B For Beneficiary

This information is being furnished to the IRS.

Sample



# Form 5498-SA, HSA, Archer MSA, or Medicare Advantage MSA Information

		<input type="checkbox"/> CORRECTED (if checked)	
TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 Employee or self-employed person's Archer MSA contributions made in 2022 and 2023 for 2022  \$	OMB No. 1545-1518  <b>2022</b> Form <b>5498-SA</b>
TRUSTEE'S TIN <b>12-3456789</b>	PARTICIPANT'S TIN <b>XXX-XX-1234</b>	2 Total contributions made in 2022  \$ <b>3000.00</b>	<b>HSA, Archer MSA, or Medicare Advantage MSA Information</b>
PARTICIPANT'S name  <b>Kris Q. Public</b>  Street address (including apt. no.) <b>1 Main St</b> City or town, state or province, country, and ZIP or foreign postal code <b>Melrose, NY 12121</b>		4 Rollover contributions  \$ <b>200.00</b>	5 Fair market value of HSA, Archer MSA, or MA MSA  \$ <b>10000.00</b>
		6 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>	
Account number (see instructions)  <b>123-1234567</b>			
Form <b>5498-SA</b> (keep for your records)		www.irs.gov/Form5498SA      Department of the Treasury - Internal Revenue Service	

**Copy B**

**For Participant**

This information is being furnished to the IRS.

Sample



# Form W-2, Wage and Tax Statement

a Employee's social security number <b>XXX-XX-1234</b>	Safe, accurate, FAST! Use  Visit the IRS website at <a href="http://www.irs.gov/efile">www.irs.gov/efile</a>			
OMB No. 1545-0008				
b Employer identification number (EIN) <b>12-3456789</b>	1 Wages, tips, other compensation <b>44416.74</b>		2 Federal income tax withheld <b>6907.16</b>	
c Employer's name, address, and ZIP code  <b>Financial Intelligence Associates 12022 Sundown Valley Dr Suite 230 Reston, VA 20191</b>	3 Social security wages <b>47162.92</b>		4 Social security tax withheld <b>2924.10</b>	
	5 Medicare wages and tips <b>47162.92</b>		6 Medicare tax withheld <b>683.86</b>	
	7 Social security tips		8 Allocated tips	
d Control number <b>012547 WY/OA7</b>	9		10 Dependent care benefits	
e Employee's first name and initial <b>Kris Q</b>	Last name <b>Public</b>	Suff.	11 Nonqualified plans	12a See instructions for box 12  <b>C   301.50</b>
1 Main St Melrose, NY 12121			13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b  <b>D   2746.18</b>
			14 Other	12c  <b>DD   4781.88</b>
f Employee's address and ZIP code				12d  <b>     </b>
15 State Employer's state ID number <b>OH   OH 036-133505158F-01</b>	16 State wages, tips, etc. <b>44416.74</b>	17 State income tax <b>1726.78</b>	18 Local wages, tips, etc. <b>44416.74</b>	19 Local income tax <b>427.62</b>
				20 Locality name <b>Kirtland</b>

**W-2 Wage and Tax Statement**

Form **Copy B—To Be Filed With Employee's FEDERAL Tax Return.**  
This information is being furnished to the Internal Revenue Service.

**2022**

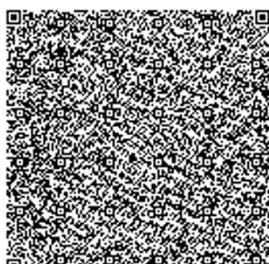
Department of the Treasury—Internal Revenue Service

*Sample*

**QR CODE WITH TAX DOCUMENT DATA**

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 FINANCIAL DATA EXCHANGE

# Form W-2G, Certain Gambling Winnings

2022 Tax Information

Sample



<b>44444</b>	<b>For Official Use Only ►</b> OMB No. 1545-0008			Safe, accurate, FAST! Use 	Visit the IRS website at <a href="http://www.irs.gov">www.irs.gov</a> .
<b>a Employer's name, address, and ZIP code</b> <b>Financial Intelligence Associates</b> <b>12022 Sundown Valley Dr</b> <b>Suite 230</b> <b>Reston, VA 20191</b>			<b>c Tax year/Form corrected</b> <b>2022 / W-2</b>		<b>d Employee's correct SSN</b> <b>XXX-XX-1234</b>
			<b>e Corrected SSN and/or name (Check this box and complete boxes f and/or g if incorrect on form previously filed.)</b> <input type="checkbox"/>		<b>f Employee's previously reported SSN</b> <b>XXX-XX-1234</b>
<b>b Employer's Federal EIN</b> <b>12-3456789</b>			<b>g Employee's previously reported name</b> <b>Kris Q Public</b>		
			<b>h Employee's first name and initial</b> <b>Kris Q</b>	<b>Last name</b> <b>Public</b>	<b>Suff.</b>
<b>Note.</b> Only complete money fields that are being corrected (exception: for corrections involving MQGE, see the General Instructions for Forms W-2 and W-3, under Specific Instructions for Form W-2c, boxes 5 and 6).			<b>1 Main St Melrose, NY 12121</b>		
			<b>i Employee's address and ZIP code</b>		
<b>Previously reported</b>		<b>Correct information</b>		<b>Previously reported</b>	<b>Correct information</b>
1 Wages, tips, other compensation <b>44416.74</b>	1 Wages, tips, other compensation <b>44416.74</b>	2 Federal income tax withheld <b>6907.16</b>	2 Federal income tax withheld <b>6907.16</b>	10 Dependent care benefits <b>301.50</b>	10 Dependent care benefits <b>2746.18</b>
3 Social security wages <b>47162.92</b>	3 Social security wages <b>47162.92</b>	4 Social security tax withheld <b>2924.10</b>	4 Social security tax withheld <b>2924.10</b>	12a See instructions for box 12 <b>C</b>	12a See instructions for box 12 <b>D</b>
5 Medicare wages and tips <b>47162.92</b>	5 Medicare wages and tips <b>47162.92</b>	6 Medicare tax withheld <b>683.86</b>	6 Medicare tax withheld <b>683.86</b>	12b <b>C</b>	12b <b>D</b>
7 Social security tips	7 Social security tips	8 Allocated tips <b>2746.18</b>	8 Allocated tips <b>5781.88</b>	12c <b>DD</b>	12c <b>DD</b>
9	9	10 Dependent care benefits <b>301.50</b>	10 Dependent care benefits <b>2746.18</b>	12d <b>C</b>	12d <b>C</b>
11 Nonqualified plans	11 Nonqualified plans	12a See instructions for box 12 <b>C</b>	12a See instructions for box 12 <b>D</b>	12c <b>DD</b>	12c <b>DD</b>
13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	13 Statutory employee <input type="checkbox"/> Retirement plan <input checked="" type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b <b>C</b>	12b <b>D</b>	12d <b>C</b>	12d <b>C</b>
14 Other (see instructions)	14 Other (see instructions)	12c <b>DD</b>	12c <b>DD</b>	12d <b>C</b>	12d <b>C</b>
<b>State Correction Information</b>					
<b>Previously reported</b>		<b>Correct information</b>		<b>Previously reported</b>	<b>Correct information</b>
15 State <b>OH</b>	15 State <b>OH</b>	15 State	15 State	16 State wages, tips, etc. <b>44416.74</b>	16 State wages, tips, etc. <b>44416.74</b>
Employer's state ID number <b>OH 036-133505158F-01</b>		Employer's state ID number <b>OH 036-133505158F-01</b>		Employer's state ID number	
16 State wages, tips, etc. <b>44416.74</b>	16 State wages, tips, etc. <b>44416.74</b>	16 State wages, tips, etc. <b>44416.74</b>	16 State wages, tips, etc. <b>44416.74</b>	17 State income tax <b>1726.78</b>	17 State income tax <b>1726.78</b>
<b>Locality Correction Information</b>					
<b>Previously reported</b>		<b>Correct information</b>		<b>Previously reported</b>	<b>Correct information</b>
18 Local wages, tips, etc. <b>44416.74</b>	18 Local wages, tips, etc. <b>44416.74</b>	18 Local wages, tips, etc. <b>44416.74</b>	18 Local wages, tips, etc. <b>44416.74</b>	19 Local income tax <b>427.62</b>	19 Local income tax <b>427.62</b>
20 Locality name <b>Kirtland</b>	20 Locality name <b>Kirtland</b>	20 Locality name	20 Locality name	20 Locality name	20 Locality name

**Copy B—To Be Filed with Employee's FEDERAL Tax Return**

Form **W-2c** (Rev. 8-2014)

**Corrected Wage and Tax Statement**

Department of the Treasury  
Internal Revenue Service



# Form W-2G, Certain Gambling Winnings

<input type="checkbox"/> CORRECTED (if checked)		
PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code  <b>Financial Intelligence Associates</b> 12022 Sundown Valley Dr Reston, VA 20191		1 Reportable winnings  \$ <b>24075.65</b>
		2 Date won  <b>04/01/2022</b>
		3 Type of wager  <b>HHR Jackpot</b>
		4 Federal income tax withheld  \$ <b>6018.91</b>
		5 Transaction  <b>VCH#334249</b>
		6 Race  <b>\$1 Tiki Bar</b>
		7 Winnings from identical wagers  \$ <b>NC 3370</b>
		8 Cashier  <b>123-45-6789</b>
		9 Winner's taxpayer identification no.  <b>MI0905</b>
		10 Window  <b>WY DL 123456-789</b>
		11 First identification  <b>123-45-6789</b>
		12 Second identification  <b>123-45-6789</b>
WINNER'S name  <b>Kris Q. Public</b>		13 State/Payer's state identification no.  <b>1 Main St</b>
Street address (including apt. no.)  <b>Melrose, NY 12121</b>		14 State winnings  \$
City or town, province or state, country, and ZIP or foreign postal code		15 State income tax withheld  \$
		16 Local winnings  \$
		17 Local income tax withheld  \$
		18 Name of locality

Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

Signature ►

Date ►

Form **W-2G** (Rev. 1-2021)

[www.irs.gov/FormW2G](http://www.irs.gov/FormW2G)

Department of the Treasury - Internal Revenue Service

OMB No. 1545-0238

## Form W-2G Certain Gambling Winnings

(Rev. January 2021)

For calendar year  
20 **22**

This information  
is being furnished  
to the Internal  
Revenue Service.

**Copy B**  
Report this income  
on your federal tax  
return. If this form  
shows federal  
income tax  
withheld in box 4,  
attach this copy  
to your return.

### QR CODE WITH TAX DOCUMENT DATA

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

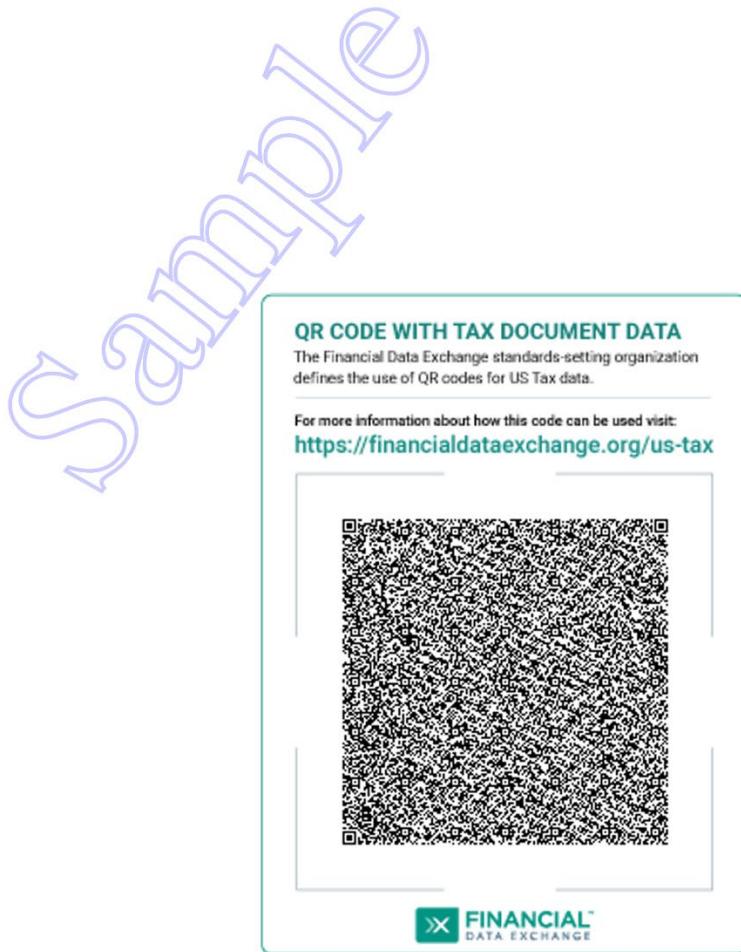
For more information about how this code can be used visit:  
<https://financialdataexchange.org/us-tax>



 FINANCIAL  
DATA EXCHANGE

# Form 1042-S Foreign Person's US Source Income Subject to Withholding

## 2022 Tax Information



**1042-S**Form 1042-S  
Department of the Treasury  
Internal Revenue Service**Foreign Person's U.S. Source Income Subject to Withholding****2022**

OMB No. 1545-0096

**Copy B**  
for Recipient

		0 1 2 3 4 5 6 7 8 9		UNIQUE FORM IDENTIFIER	<input type="checkbox"/> AMENDED	<input type="checkbox"/> AMENDMENT NO.
1 Income code	2 Gross income	3 Chapter indicator. Enter "3" or "4"	4	13e Recipient's U.S. TIN, if any	13f Ch. 3 status code 16	
16	205.00	3a Exemption code 11	4a Exemption code 00	xxx-xx-1234	13g Ch. 4 status code 02	
5 Withholding allowance		5011.00		13h Recipient's GIIN	13i Recipient's foreign tax identification number, if any	13j LOB code
6 Net income		6012.00		987654300		11
7a Federal tax withheld		7013.00		13k Recipient's account number <b>xxxxxxxx4455</b>		
7b Check if federal tax withheld was not deposited with the IRS because escrow procedures were applied (see instructions) . . . . .		<input type="checkbox"/>		13l Recipient's date of birth (YYYYMMDD) <b>1 9 4 2 1 2 2 1</b>		
7c Check if withholding occurred in subsequent year with respect to a partnership interest . . . . .		<input checked="" type="checkbox"/>		14a Primary Withholding Agent's Name (if applicable) <b>Primary W. Agent</b>		
8 Tax withheld by other agents		8016.00		14b Primary Withholding Agent's EIN <b>00-1122334</b>		
9 Overwithheld tax repaid to recipient pursuant to adjustment procedures (see instructions) ( )		9017.00		15 Check if pro-rata basis reporting <input type="checkbox"/>		
10 Total withholding credit (combine boxes 7a, 8, and 9)		24046.00		15a Intermediary or flow-through entity's EIN, if any	15b Ch. 3 status code	15c Ch. 4 status code
11 Tax paid by withholding agent (amounts not withheld) (see instructions)		11019.00		<b>88-8888888</b>	<b>02</b>	<b>16</b>
12a Withholding agent's EIN		12b Ch. 3 status code	12c Ch. 4 status code	15d Intermediary or flow-through entity's name <b>Contact Name</b>		
<b>12-3456789</b>		<b>15</b>	<b>02</b>	15e Intermediary or flow-through entity's GIIN <b>CA</b> <b>987654321</b>		
12d Withholding agent's name		Financial Intelligence Associates		15f Country code    15g Foreign tax identification number, if any		
12e Withholding agent's Global Intermediary Identification Number (GIIN)		<b>01234576890</b>		15h Address (number and street) <b>1718-1/2 Oak Blvd</b>		
12f Country code	12g Foreign tax identification number, if any	CA		15i City or town, state or province, country, ZIP or foreign postal code <b>Austin, TX 78735</b>		
12h Address (number and street)		<b>12022 Sundown Valley Dr</b>		16a Payer's name	16b Payer's TIN	
12i City or town, state or province, country, ZIP or foreign postal code		<b>Reston, VA 20191</b>		<b>Financial Intelligence Associates Payer</b>		<b>99-0011223</b>
13a Recipient's name		13b Recipient's country code		16c Payer's GIIN	16d Ch. 3 status code	16e Ch. 4 status code
<b>Kris Q. Public</b>		<b>CA</b>		<b>00123457689</b>	<b>15</b>	<b>02</b>
13c Address (number and street)		<b>1 Main St</b>		17a State income tax withheld	17b Payer's state tax no.	17c Name of state
13d City or town, state or province, country, ZIP or foreign postal code		<b>Melrose, NY 12121</b>		<b>17025.00</b>	<b>001234567</b>	<b>NY</b>

(keep for your records)

Form 1042-S (2022)



# Form 1041 Schedule K1

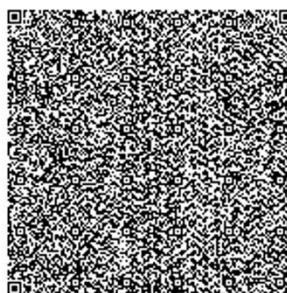
2022 Tax Information

Sample

## 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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**Schedule K-1  
(Form 1041)**

 Department of the Treasury  
Internal Revenue Service
**2022**

For calendar year 2022, or tax year

beginning **01 / 01 / 2022** ending **12 / 31 / 2022**
**Beneficiary's Share of Income, Deductions,  
Credits, etc.**

See back of form and instructions.

<b>Part I Information About the Estate or Trust</b>		<b>Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items</b>	
<b>A</b>	Estate's or trust's employer identification number  <b>12-3456789</b>	<b>1</b>	Interest income  1013.00
<b>B</b>	Estate's or trust's name  <b>American People's Trust</b>	<b>2a</b>	Ordinary dividends  2014.00
<b>C</b>	Fiduciary's name, address, city, state, and ZIP code  <b>American People Corp. 1718-1/2 Oak Blvd Suite 230 Austin, TX 78735</b>	<b>2b</b>	Qualified dividends  2015.00
<b>D</b>	<input checked="" type="checkbox"/> Check if Form 1041-T was filed and enter the date it was filed  <b>05/01/2022</b>	<b>3</b>	Net short-term capital gain  3016.00
<b>E</b>	<input checked="" type="checkbox"/> Check if this is the final Form 1041 for the estate or trust	<b>4a</b>	Net long-term capital gain  4017.00
<b>Part II Information About the Beneficiary</b>		<b>4b</b>	28% rate gain  4018.00
<b>F</b>	Beneficiary's identifying number  <b>XXX-XX-1234</b>	<b>4c</b>	Unrecaptured section 1250 gain  4019.00
<b>G</b>	Beneficiary's name, address, city, state, and ZIP code  <b>Kris Q. Public 1 Main St Melrose, NY 12121</b>	<b>5</b>	Other portfolio and nonbusiness income  5020.00
<b>H</b>	<input checked="" type="checkbox"/> Domestic beneficiary <input type="checkbox"/> Foreign beneficiary	<b>6</b>	Ordinary business income  6021.00
		<b>7</b>	Net rental real estate income  7022.00
		<b>8</b>	Other rental income  8023.00
		<b>9</b>	Directly apportioned deductions  A 9024.00
		<b>10</b>	Estate tax deduction  10025.00
*See attached statement for additional information. <b>Note:</b> A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.			
For IRS Use Only			

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

[www.irs.gov/Form1041](http://www.irs.gov/Form1041)

Cat. No. 11380D

Schedule K-1 (Form 1041) 2022

# Form 1065 Schedule K1

2022 Tax Information

Sample



**Schedule K-1  
(Form 1065)**
**2022**Department of the Treasury  
Internal Revenue Service

For calendar year 2022, or tax year

beginning **01 / 01 / 2022** ending **12 / 31 / 2022**
**Partner's Share of Income, Deductions,  
Credits, etc.**  
See separate instructions.

**Part I Information About the Partnership**

A Partnership's employer identification number  
**12-3456789**

B Partnership's name, address, city, state, and ZIP code

American People Corp.  
1718-1/2 Oak Blvd  
Suite 230  
Austin TX 78735

C IRS center where partnership filed return: Ogden

D  Check if this is a publicly traded partnership (PTP)

**Part II Information About the Partner**

E Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)  
**XXX-XX-1234**

F Name, address, city, state, and ZIP code for partner entered in E. See instructions.

Kris Q. Public  
1 Main St  
Melrose, NY 12121

G  General partner or LLC member-manager       Limited partner or other LLC member

H1  Domestic partner       Foreign partner

H2  If the partner is a disregarded entity (DE), enter the partner's:

TIN \_\_\_\_\_ Name \_\_\_\_\_

I1 What type of entity is this partner? **LLC**

I2 If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here

J Partner's share of profit, loss, and capital (see instructions):

Beginning	Ending
Profit 20.00 %	21.00 %
Loss 22.00 %	23.00 %
Capital 24.00 %	25.00 %

Check if decrease is due to sale or exchange of partnership interest

K Partner's share of liabilities:

Beginning	Ending
Nonrecourse . . . \$ 27.00	\$ 28.00
Qualified nonrecourse financing . . . \$ 29.00	\$ 30.00
Recourse . . . \$ 31.00	\$ 32.00

Check this box if item K includes liability amounts from lower-tier partnerships

**L Partner's Capital Account Analysis**

Beginning capital account . . . . .	\$ 134.00
Capital contributed during the year . . . . .	\$ 135.00
Current year net income (loss) . . . . .	\$ 136.00
Other increase (decrease) (attach explanation) . . . . .	\$ 137.00
Withdrawals and distributions . . . . . \$ (	\$ 138.00)
Ending capital account . . . . .	\$ 139.00

M Did the partner contribute property with a built-in gain (loss)?

Yes  No If "Yes," attach statement. See instructions.

**N Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)**

Beginning . . . . .	\$ 246.00
Ending . . . . .	\$ 247.00

 Final K-1       Amended K-1

<b>Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items</b>		
1 Ordinary business income (loss)	1048.00	14 Self-employment earnings (loss)
2 Net rental real estate income (loss)	2049.00	S 14067.00
3 Other net rental income (loss)	3050.00	15 Credits 15068.00
4a Guaranteed payments for services	4252.00	
4b Guaranteed payments for capital	4353.00	16 Schedule K-3 is attached if checked . . . . . <input type="checkbox"/>
4c Total guaranteed payments	4151.00	17 Alternative minimum tax (AMT) items W 17071.00
5 Interest income	5054.00	
6a Ordinary dividends	6155.00	
6b Qualified dividends	6256.00	18 Tax-exempt income and nondeductible expenses X 18072.00
6c Dividend equivalents	6357.00	
7 Royalties	7058.00	
8 Net short-term capital gain (loss)	8059.00	
9a Net long-term capital gain (loss)	9160.00	19 Distributions Y 19073.00
9b Collectibles (28%) gain (loss)	9261.00	
9c Unrecaptured section 1250 gain	9362.00	20 Other information Z 20074.00
10 Net section 1231 gain (loss)	10063.00	
11 Other income (loss)	11064.00	
12 Section 179 deduction	12065.00	21 Foreign taxes paid or accrued
13 Other deductions	13066.00	

22  More than one activity for at-risk purposes\*

23  More than one activity for passive activity purposes\*

\*See attached statement for additional information.

For IRS Use Only

# Form 1120-S Schedule K1

## 2022 Tax Information

Sample



671121

Final K-1     Amended K-1    OMB No. 1545-0123

**Schedule K-1  
(Form 1120-S)**

Department of the Treasury  
Internal Revenue Service

2022

For calendar year 2022, or tax year

beginning 01 / 01 / 2022

ending 12 / 31 / 2022

**Shareholder's Share of Income, Deductions,  
Credits, etc.**  
See separate instructions.

<b>Part I Information About the Corporation</b>			
A Corporation's employer identification number 12-3456789			
B Corporation's name, address, city, state, and ZIP code  American People Corp. 1718-1/2 Oak Blvd Suite 230 Austin, TX 78735		5b Qualified dividends 5220.00	14 Schedule K-3 is attached if checked . . . . . <input type="checkbox"/>
C IRS Center where corporation filed return Ogden		6 Royalties 6021.00	15 Alternative minimum tax (AMT) items 15033.00
D Corporation's total number of shares Beginning of tax year . . . . . End of tax year . . . . .		7 Net short-term capital gain (loss) 7022.00	
E Shareholder's identifying number xxx-xx-1234		8a Net long-term capital gain (loss) 8123.00	
F Shareholder's name, address, city, state, and ZIP code  Kris Q. Public 1 Main St Melrose, NY 12121		8b Collectibles (29%) gain (loss) 8224.00	
G Current year allocation percentage . . . . . 10.00 %		8c Unrecaptured section 1250 gain 8325.00	
H Shareholder's number of shares Beginning of tax year . . . . . End of tax year . . . . .		9 Net section 1231 gain (loss) 9026.00	16 Items affecting shareholder basis 16034.00
I Loans from shareholder Beginning of tax year . . . . . \$ 1300.00 End of tax year . . . . . \$ 1400.00		10 Other income (loss) A 10027.00	
		11 Section 179 deduction 11028.00	
		12 Other deductions A 12029.00	
		18 <input type="checkbox"/> More than one activity for at-risk purposes*	
		19 <input type="checkbox"/> More than one activity for passive activity purposes*	
* See attached statement for additional information.			

For IRS Use Only

For Paperwork Reduction Act Notice, see the Instructions for Form 1120-S. www.irs.gov/Form1120S Cat. No. 11520D Schedule K-1 (Form 1120-S) 2022

