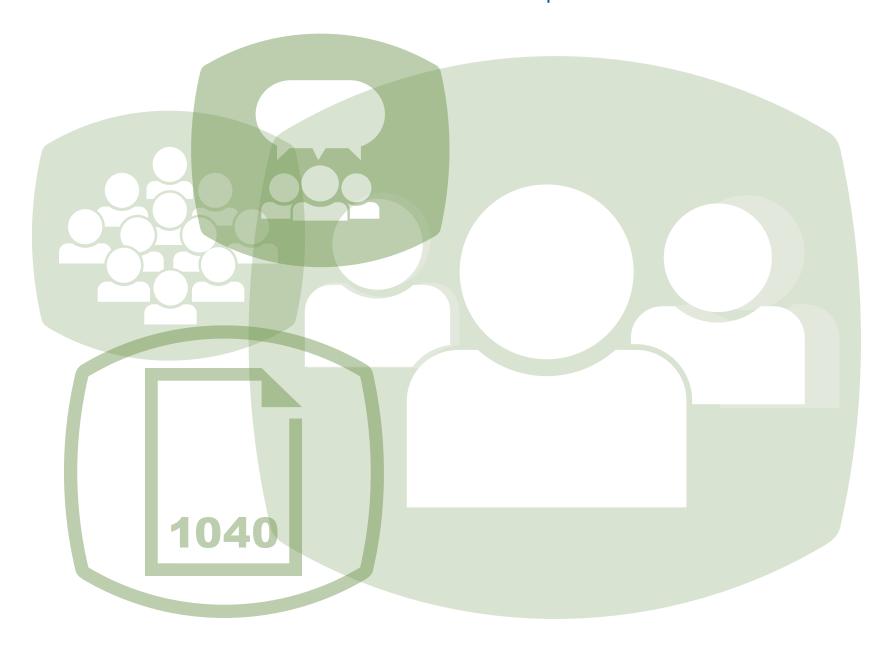


Individual Information Returns 2020 **Line Item Estimates**



www.irs.gov/statistics

Department of the Treasury Internal Revenue Service

2020 Individual Information Returns, Line Item Estimates

(Rev. 2-2023)

Douglas W. O'Donnell IRS Acting Commissioner

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Officer, Statistics
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Acting Chief Individual & Tax Exempt Branch, Statistics of Income This 2020 Statistics of Income (SOI) Information Returns, line item estimates publication provides estimates of frequencies and amounts of the entries on the lines of the forms filed for selected information returns that accompany the 2020 Individual SOI complete report weighted file. The estimates presented here are based on returns filed in Processing Year 2021 that were sampled statistically and then weighted to estimate the entire 2020 Tax Year.

For each information return, we provide three sets of counts. These include frequencies per form line entry, number of individuals per form line entry, and total amount per form line entry. The frequencies per form line entry were computed by selecting all information returns filed, excluding those returns that were filed in duplicate or corrected by a subsequently filed amended. The number of individuals per form line entry was computed by aggregating frequencies per form line entry to the individual level, as several information returns can be filed on behalf of a single individual. The amounts represent the dollar sum in thousands of dollars reported for each line item.

Suggested Citation

Statistics of Income--2020 Individual Information Returns Line Item Estimates Internal Revenue Service Washington, D.C.

Description of the Sample for the Line Item Estimates

This section describes the domain of the study, the sample design and selection, data capture and cleaning, the method of estimation, and the sampling variability of the estimates.

Domain of Study

The statistics in this report are estimates from a probability sample of Individual Information Returns, filed by third parties about certain business and money transactions on behalf of U.S. citizens and residents selected for inclusion in the sample of unaudited Individual Income Tax Returns, Form 1040 (including electronic returns) filed during Calendar year 2020, being reported as a dependent on a selected Tax Return, or if the citizen or resident for which the information return was filed possesses certain combinations of the four ending digits of the social security number (SSN) but no Tax Return was filed. To avoid double counting, information returns associated with dependent tax returns were excluded because they were instead included in association with their parents returns.

All returns processed during 2021 were subjected to sampling except tentative and amended returns. Tentative returns were not subjected to sampling because the revised returns may have been sampled later, while amended returns were excluded because the original returns had already been subjected to sampling. A small percentage of returns were not identified as tentative or amended until after sampling. These returns were excluded in the selection of the Information Returns sample and in calculating estimates.

The estimates in this report are intended to represent all Information Returns filed for Tax Year 2020. While most of the returns processed during Calendar Year 2021 were filed for Tax Year 2020, a small portion of returns were for prior years.

Sample Design and Selection

The sample design is a stratified probability sample in which the population of tax returns is classified into subpopulations, called strata, and an independent sample is randomly selected from each stratum. Strata are defined by the following characteristics:

- 1. Nontaxable (including no alternative minimum tax) with adjusted gross income or expanded income of \$200,000 or more.
- 2. High business receipts of \$50,000,000 or more.
- 3. Presence or absence of special forms or schedules (Form 2555, Form 1116, Form 1040 Schedule C, and Form 1040 Schedule F).
- 4. Indexed positive or negative income. Sixty variables are used to derive positive and negative incomes. These positive and negative income classes are deflated using the Chain-Type Price Index for the Gross Domestic Product to represent a base year of 2016.

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during Calendar Year 2021 were used to assign each taxpayer's record to the appropriate stratum and to determine whether the record should be included in the sample. Records are selected for the sample either if they possess certain combinations of the four ending digits of their Social Security number (SSN), or if their five ending digits of an eleven-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000.

The portion of the sample covering those with no filed tax return is designed as a simple random sample of recipients of information returns possessing certain combinations of the four ending digits of the social security number (SSN).

Data Capture and Cleaning

Data capture for the SOI sample begins with the designation of a sample of administrative records. While the sample was being selected, the process was continually monitored for sample selection and data collection errors.

The administrative data and controlling information for each record designated for this sample were then run through an automated corrections process. The process resolves inconsistencies resulting from duplicated filings and replaces erroneous returns with filed amended returns.

Some returns designated for the sample were not available for SOI processing because other areas of IRS needed the return at the same time. For Tax Year 2020, about 0.7 percent of the sample returns were unavailable.

Due to the COVID-19 pandemic, delays in processing Tax Year 2020 returns occurred because of the temporary closing of submission processing centers. Approximately 4.5 million tax returns were

ultimately processed during the beginning of Tax Year 2021. Individuals associated with these tax returns were moved into the Tax Year 2020 sample domain.

Method of Estimation

Weights were obtained by dividing the population count of returns in a stratum by the number of sampled returns for that stratum. The weights were adjusted to correct for misclassified returns and were then applied to the sample data to produce all the estimates in this report.

For returns having no matching tax return, weights were obtained by calculating the inverse of the sampling share (10 in 9,999).

Sampling Variability

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The standard error (SE) of an estimate is a measure of the variation among the estimates from the possible samples and, thus, is a measure of the precision with which an estimate from a particular sample approximates the average of the estimates calculated from all possible samples.

Form **1099-K**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	FILER'S TIN		OMB No. 1545-2205		
Total of all forms filed = 2,900,159	PAYEE'S TIN 1a Gross amour card/third pa transactions	rty network	2020	Payr	nent Card and Third Party Network Transactions
	\$	2,864,272		L	
	1b Card Not Pre transactions	esent	2 Merchant categor	y code	Copy 1
Check to indicate if FILER is a (an): Check to indicate transactions reported are:] \$	1,749,737			For State Tax
Payment settlement entity (PSE) Payment card	3 Number of pa		4 Federal income ta withheld	х	Department
Electronic Payment Facilitator Third party network	transactions		\$	19,406	
PAYEE'S name	5a January		5b February		
	\$	1,928,305	\$ 1,	,973,039	
	5c March		5d April		
Street address (including apt. no.)	\$	1,985,507	\$ 1,	,607,064	
	5e May		5f June		
	\$	1,799,170	Ť	,918,860	
	5g July		5h August		
City or town, state or province, country, and ZIP or foreign postal code	\$	1,956,084	ΙΨ	,977,562	
	5i September		5j October		
PSE'S name and telephone number	\$	1,968,945	\$ 1	,966,612	
	5k November		5I December		
	\$	1,929,227	<u> </u>	,873,993	
Account number (see instructions)	6 State		7 State identification	n no.	8 State income tax withheld
	L		<u> </u>		\$
			[l	\$

Department of the Treasury - Internal Revenue Service

www.irs.gov/Form1099K

Form **1099-K**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP	FILER'S TIN		OMB No. 1545-2205			
or foreign postal code, and telephone no. Total of all individuals represented = 2,377,774	PAYEE'S TIN		2020	Payme	nent Card and Third Party	
	1a Gross amour card/third pa transactions			ו	Network Fransactions	
	\$	2,351,292	Form 1099-K			
	1b Card Not Pre transactions	esent	2 Merchant category	y code	Copy 1	
Check to indicate if FILER is a (an): Check to indicate transactions reported are:		1,457,468			For State Tax	
Payment settlement entity (PSE) Payment card	3 Number of patransactions		4 Federal income ta withheld	х	Department	
Electronic Payment Facilitator Third party network]		\$	16,582		
PAYEE'S name	5a January		5b February			
	\$	1,721,690	\$ 1,	768,942		
	5c March		5d April			
Street address (including apt. no.)	\$	1,776,022	\$ 1,	449,039		
	5e May		5f June			
	\$	1,601,568	\$ 1,	703,741		
	5g July		5h August			
City or town, state or province, country, and ZIP or foreign postal code	\$	1,752,900	\$ 1,	771,483		
	5i September		5j October			
PSE'S name and telephone number	\$	1,773,058	\$ 1,	768,803		
	5k November		5I December			
	\$	1,738,443	\$ 1,	682,765		
Account number (see instructions)	6 State		7 State identification	n no. 8	State income tax withheld	
	+		 	·†š-		

Department of the Treasury - Internal Revenue Service

www.irs.gov/Form1099K

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	FILER'S TIN	OMB No. 1545-2205	
Total of all forms filed = 2.900,159	PAYEE'S TIN		ment Card and, Third Party
Total of all forms filed = 2,300,133	1a Gross amount of payment card/third party network transactions		Network Transactions
	\$ 167,042,472	Form 1099-K	
	1b Card Not Present transactions	2 Merchant category code	Copy 1
Check to indicate if FILER is a (an): Check to indicate transactions reported are:	\$ 60,804,860		For State Tax
Payment settlement entity (PSE) Payment card	3 Number of payment transactions	4 Federal income tax withheld	Department
Electronic Payment Facilitator (EPF)/Other third party Third party network]	\$ 120,25	
PAYEE'S name	5a January	5b February	
	\$ 12,077,797	12,606,98	2
	5c March	5d April	
Street address (including apt. no.)	\$ 11,728,485	\$ 10,165,62	7
	5e May	5f June	
	\$ 13,398,729	\$ 14,292,68	3
	5g July	5h August	
City or town, state or province, country, and ZIP or foreign postal code	\$ 15,232,485	\$ 15,745,30	4
	5i September	5j October	
PSE'S name and telephone number	\$ 14,787,099	\$ 15,483,36	1
	5k November	5I December	
	\$ 15,832,096	\$ 15,684,24	0
Account number (see instructions)	6 State	7 State identification no.	8 State income tax withheld
			\$
			\$
Form 1099-K www.irs.gov/Form1099	K	Department of the Treasury	- Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

	55555	a Employee's social security number	OMB No. 154	15-0008			
b Emp	loyer identification number	(EIN)	1	1 Wa	ges, tips, other compensation 267,334,955	2 Federal income t	ax withheld 21,690,856
c Emp	loyer's name, address, and	ZIP code		3 So	cial security wages 255,441,403	4 Social security ta 2	x withheld 53,917,872
	Total of all forms filed	i = 268,683,613		5 Me	edicare wages and tips 261,859,247	6 Medicare tax wit	hheld 57,059,356
				7 Social security tips 8 Allocated tips 5			53,287
d Cont	rol number			9 10 Dependent care benefi 2,18			benefits 2,181,023
e Emp	loyee's first name and initia	I Last name	Suff.			71,794,896	
				13 Stat emp	rutory Retirement Third-party plan sick pay	12b c''AA"	8,852,763
				14 Oth	ner	12c °"DD"	75,159,615
						12d © "W"	15,253,183
f Empl	oyee's address and ZIP cod	de					_
15 State	Employer's state ID numb	per 16 State wages, tips, etc.	17 State incon	ne tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form W-2	Wage and Tax Statement
Copy 1-For State	e, City, or Local Tax Department

5050

Department of the Treasury-Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

	7777	a Employee's social security number					
	55555		OMB No. 154	5-0008			
b Emp	loyer identification number	(EIN)		1 Wa	ges, tips, other compensation 184,034,361	2 Federal incom	me tax withheld 168,145,761
c Emp	loyer's name, address, and	ZIP code		3 So	cial security wages 176,781,880	4 Social securi	ty tax withheld 176,281,116
То	tal of all individuals re	presented = 184,474,641		7 Social security tips 8 Allocated tips			withheld 180,153,796
							53,284
d Conf	trol number			9		10 Dependent of	are benefits
							2,097,361
e Emp	loyee's first name and initia	Last name	Suff.	11 No	onqualified plans	¹ 2 6 ","D", ² "E","F"	67,624,333
				13 Stat	tutory Retirement Third-party ployee plan sick pay	12b ^C "AA"	8,560,563
				14 Oth	ner	12c ^C "DD"	70,823,135
						12d C "W"	14,726,954
f Empl	oyee's address and ZIP cod	de				·	
15 State	Employer's state ID numb	per 16 State wages, tips, etc.	17 State incor	ne tax	18 Local wages, tips, etc.	19 Local income ta	20 Locality name
	-						

Form **W-2** Wage and Tax Statement Copy 1—For State, City, or Local Tax Department

5050

Department of the Treasury-Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

55555	a Employee's social security number	OMB No. 154	5-0008			
b Employer identification number	(EIN)		1 Wag	ges, tips, other compensation 8,160,100,000	2 Federal income t	ax withheld 94,143,500
c Employer's name, address, and Total of all forms filed			3 Soc	rial security wages 7,735,142,300	4 Social security to 4	x withheld 80,762,505
Total of all forms filed	Total of all forms filed = 200,000,013			dicare wages and tips 9,663,962,800	6 Medicare tax withheld 150,244,436	
			7 Social security tips 8 Allocated tips 37,131,046			48,875
d Control number			9 10 Dependent care benef 6,01			benefits 6,013,753
e Employee's first name and initia	Last name	Suff.				72,829,231
			13 Statutory employee Patriement Third-party sick pay 14 Other		12b "AA"	38,227,639
					12c g "DD" 7	49,026,069
			12d "W" 36			36,234,742
f Employee's address and ZIP cod	de					
15 State Employer's state ID numb	eer 16 State wages, tips, etc.	17 State incon	ne tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
					·	

Form **W=2** Wage and Tax Statement Copy 1—For State, City, or Local Tax Department

5050

Department of the Treasury-Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

CORRECTED (if checked) TRANSFEROR'S name, street address, city or town, state or province, OMB No. 1545-2129 1 Date option granted country, and ZIP or foreign postal code Exercise of an Form 3921 **Incentive Stock Option Under** 2 Date option exercised Total of all forms filed = 303,261 Section 422(b) (Rev. October 2017) TRANSFEROR'S TIN EMPLOYEE'S TIN Copy B 3 Exercise price per share 4 Fair market value per share on exercise date For Employee EMPLOYEE'S name <u>256,520</u> |\$ 277,742 This is important tax 5 No. of shares transferred information and is being furnished to the IRS. If you are required Street address (including apt. no.) 6 If other than TRANSFEROR, name, address, and TIN of to file a return, a negligence penalty or other sanction may be corporation whose stock is being transferred imposed on you if this item is required to be City or town, state or province, country, and ZIP or foreign postal code reported and the IRS determines that it has Account number (see instructions) not been reported. Form **3921** (Rev. October 2017) (keep for your records) www.irs.gov/Form3921 Department of the Treasury - Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

TRANSFEROR'S name, street address country, and ZIP or foreign postal country. Total of all individuals rep	ode	Date option granted Date option exercised	OMB No. 1545-2129 Form 3921 (Rev. October 2017)	Exercise of an Incentive Stock Option Under Section 422(b)
TRANSFEROR'S TIN	EMPLOYEE'S TIN	3 Exercise price per share	4 Fair market value per shall on exercise date	Copy B For Employee
EMPLOYEE'S name	•	\$ 88,54	1 \$ 97.3	04 This is important tax
		5 No. of shares transferred		information and is being furnished to the IRS. If you are required
Street address (including apt. no.)		6 If other than TRANSFEROR corporation whose stock is		to file a return, a negligence penalty or other sanction may be
City or town, state or province, count	ry, and ZIP or foreign postal code			imposed on you if this item is required to be reported and the IRS
Account number (see instructions)				determines that it has not been reported.
Form 3921 (Rev. October 2017)	(keep for your records)	www.irs.gov/Form3921	Department of the Treasu	ry - Internal Revenue Service

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

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

TRANSFEROR'S name, street address, city or town, state or province, 1 Date option granted OMB No. 1545-2129 country, and ZIP or foreign postal code Exercise of an Form 3921 **Incentive Stock Option Under** 2 Date option exercised Total of all forms filed = 303,261 Section 422(b) (Rev. October 2017) EMPLOYEE'S TIN TRANSFEROR'S TIN Copy B 3 Exercise price per share 4 Fair market value per share on exercise date For Employee EMPLOYEE'S name 6,446 |\$ 32,132 This is important tax 5 No. of shares transferred information and is being furnished to the IRS. If you are required Street address (including apt. no.) 6 If other than TRANSFEROR, name, address, and TIN of to file a return, a negligence penalty or corporation whose stock is being transferred other sanction may be imposed on you if this City or town, state or province, country, and ZIP or foreign postal code item is required to be reported and the IRS determines that it has Account number (see instructions) not been reported.

www.irs.gov/Form3921

Department of the Treasury - Internal Revenue Service

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line □ VOID □ CORRECTED

5656	VOID CORF	RECTED			
CORPORATION'S name, street address		1 Date option granted	OMB No. 1545-2129	Transfer of Stock	
country, and ZIP or foreign postal cod	9		Form 3922	Acquired Through an Employee	
Total of all forms filed	= 6,294,760	2 Date option exercised		Stock Purchase Plan Under	
			(Rev. September 2016)	Section 423(c)	
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per sha on exercise date	Copy A For	
EMPLOYEE'S name		\$ 6,280,850	\$ 6,276,6		
		5 Exercise price paid per share	6 No. of shares transferred	Service Center	
		\$ 6,277,242		File with Form 1096.	
Street address (including apt. no.)		7 Date legal title transferred		For Privacy Act and Paperwork Reduction	
City or town, state or province, country	, and ZIP or foreign postal code			Act Notice, see the current version of the	
		8 Exercise price per share dete		General Instructions for	
Account number (see instructions)		exercised on the date shown		Certain Information Returns.	
		IS	5.923.8	808	

Form 3922 (Rev. 9-2016)

Cat. No. 41180P

www.irs.gov/form3922

Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line □ VOID □ CORRECTED

5P5P	VOID CORF	RECTED			
CORPORATION'S name, street addre		1 Date option granted	OMB No. 1545-2129	Transfer of Stock	
country, and ZIP or foreign postal cod Total of all individuals repre			Form 3922	Acquired Through an Employee	
	<u> </u>	2 Date option exercised	(Rev. September 2016)	Stock Purchase Plan Under Section 423(c)	
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per sha on exercise date	re Copy A For	
EMPLOYEE'S name		\$ 2,111,123	\$ 2,108,3		
		5 Exercise price paid per share	6 No. of shares transferred	Service Center	
		\$ 2,108,669		File with Form 1096.	
Street address (including apt. no.)		7 Date legal title transferred		For Privacy Act and Paperwork Reduction	
City or town, state or province, countr	y, and ZIP or foreign postal code			Act Notice, see the current version of the	
Account number (see instructions)		8 Exercise price per share det exercised on the date shows		General Instructions for Certain Information Returns.	
		 \$	2,054,2		

Form 3922 (Rev. 9-2016) Cat. No. 41180P www.irs.gov/form3922 Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) 그님으나 VOID CORRECTED

		ILOTED		
CORPORATION'S name, street addrescountry, and ZIP or foreign postal cod		1 Date option granted	OMB No. 1545-2129 Form 3922	Transfer of Stock Acquired Through an Employee
Total of all forms filed	= 6,294,760	2 Date option exercised	(Rev. September 2016)	Stock Purchase Plan Under Section 423(c)
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per sha on exercise date	re Copy A
EMPLOYEE'S name		\$ 653,235	\$ 713,6	
		5 Exercise price paid per share	6 No. of shares transferred	Service Center
		\$ 577,136		File with Form 1096.
Street address (including apt. no.)		7 Date legal title transferred		For Privacy Act and Paperwork Reduction
City or town, state or province, country	y, and ZIP or foreign postal code			Act Notice, see the current version of the
		8 Exercise price per share dete		General Instructions for
Account number (see instructions)		exercised on the date shown	in box 1	Certain Information Returns.
		\$	551,2	

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

	_			CIED	CORRI		בובו	
A, Archer MSA, o dicare Advantag MSA Informatio	HSA Med	OMB No. 1545-1518	er MSA nade in 2020 020 2,301	1 Employee or s person's Arch- contributions r and 2021 for 2 \$ 2 Total contributio	rince, country,	number	e, street address, city or stal code, and telephone otal of all forms filed	ZIP or foreign postal co
		Form 5498-SA	16,915,578	\$				
Copy A	1 for 2020	ntributions made in 202	rcher MSA cor	3 Total HSA or A		RTICIPANT'S TIN	PA	TRUSTEE'S TIN
Fo	,054,586	2,		\$				
Internal Revenu Service Cente	, , , , , , , , , , , , , , , , , , ,	5 Fair market value of Archer MSA, or MA	outions	4 Rollover contri			name	PARTICIPANT'S name
File with Form 109	.356,454	\$ 21.	16,239	\$				
For Privacy Act an Paperwoi Reduction Ad				6 HSA Archer MSA			ncluding apt. no.)	Street address (including
Notice, se the 2020 Gener				MA MSA	ostal code	d ZIP or foreign p	te or province, country, a	City or town, state or p
Instructions fo Certain Informatio Returns								Account number (see in
								- E400 CA

Form 5498-SA Cat. No. 38467V www.irs.gov/Form5498SA Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

		JKKEC	TED				
TRUSTEE'S name, street address, ci ZIP or foreign postal code, and telepl Total of all individuals repre	none number		1 Employee or s person's Arch contributions and 2021 for 2 \$ 2 Total contributions	er MSA made in 2020 2020 2,301 ons made in 2020	- F400 CA	Med	., Archer MSA, o licare Advantage MSA Information
TRUSTEE'S TIN	PARTICIPANT'S TIN		т	16,036,378	tributions made in 2021	f 0000	Comit
TRUSTEE S TIN	PARTICIPANT S TIN		_	Archer MSA con			0007.
			\$		· · · · · · · · · · · · · · · · · · ·	051,479	
PARTICIPANT'S name			4 Rollover contr	ibutions	5 Fair market value of Archer MSA, or MA	- ,	Internal Revenue Service Cente
			\$	16,239	\$ 19,	839,545	File with Form 1096
Street address (including apt. no.)			6 HSA		·		For Privacy Act and
			Archer MSA				Paperworl Reduction Ac
City or town, state or province, count	ry, and ZIP or foreign postal code	le	MA MSA				Notice, see the 2020 Genera
Account number (see instructions)							Instructions fo Certain Information
, , , , , , , , , , , , , , , , , , ,							Returns
5400.04							

Form 5498-SA Cat. No. 38467V www.irs.gov/Form5498SA Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) ONLY O

		0122			_		
TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Employee or self-employed person's Archer MSA contributions made in 2020 and 2021 for 2020				HSA, Archer MSA, or Medicare Advantage	
Total of all forms filed = 24,748,632		\$ 5,717		MSA Information			
		2 Total contributi	ons made in 2020				
		\$	42,270,542	Form 5498-SA			
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or	Archer MSA con	tributions made in 2021	for 2020	Сору А	
		\$		1,	488,188	For	
PARTICIPANT'S name		4 Rollover cont	ributions	5 Fair market value of Archer MSA, or MA		Internal Revenue Service Center	
		\$	131,249	\$ 83.	654,762	File with Form 1096.	
Street address (including apt. no.)		6 HSA Archer MSA				For Privacy Act and Paperwork Reduction Act	
City or town, state or province, country	ry, and ZIP or foreign postal code	MA MSA				Notice, see the 2020 General	
Account number (see instructions)						Instructions for Certain Information Returns.	

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		than an	ntributions (other nounts in boxes 10, 13a, and 14a) 6,009,317	OMB No. 1545-0747 2020 (Rev. April 2020)		IRA Contribution Information		
Total of all forms fi	ed = 140,165,069		r contributions				mormation	
		\$	7,122,785		5498			
		3 Roth IR amount	A conversion		racterized butions		Сору В	
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	\$	1,377,297	\$		90,662		
		5 FMV of a	account	6 Life ins	urance cost i	ncluded in	For Participant	
		\$	133,812,257	\$		*		
PARTICIPANT'S name		7 IRA	SEP 🗌	SIMPLE [Roth IF	RA 🗌	This information	
		8 SEP co	ntributions	9 SIMPI	E contribut	ions	is being	
		\$	1,299,672	\$	3,0	30,171	furnished to	
Street address (including apt. no.)		10 Roth IR	10 Roth IRA contributions 11 If checked, required r				m the IRS.	
		\$	11,610,768					
		12a RMD da	ate	12b RMD	amount			
City or town, state or province, coun	try, and ZIP or foreign postal code			\$		82,656		
		13a Postpo	ned/late contrib. 463	13b Year	13c Code			
		14a Repayn	nents	14b Code				
		\$	6,692					
Account number (see instructions)		15a FMV of assets	certain specified	15b Code	s)			
		\$	1,745,189					
Form 5498 (Rev. April 2020)	(keep for your records)	www.irs.gov	/Form5498	Departn	nent of the T	reasury -	Internal Revenue Service	

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code Total of all individuals represented = 76,883,532		than an	ntributions (other nounts in boxes 10, 13a, and 14a) 5,533,605	OMB No. 1545-0747 2020 (Rev. April 2020)		IRA Contribution	
Total of all individuals rep	resented = 76,883,532	•	r contributions	(Hev. A	JIII 2020)		Information
		\$	6,192,960	Form	5498		
		· ·	<u> </u>			1	
		amoun	A conversion t		racterized butions		Сору В
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	\$	1,301,127	\$		81,382	
		5 FMV of a	account	6 Life ins	urance cost ir	ncluded in	For Participant
		\$	74,441,734	\$		*	
PARTICIPANT'S name		7 IRA	SEP 🗌	SIMPLE [Roth IF	RA 🗌	This information
		8 SEP co	ntributions	9 SIMPI	E contributi	ons	is being
		\$	1,189,075	\$	2,2	233,815	furnished to
Street address (including apt. no.)		10 Roth IR	10 Roth IRA contributions 11 If checked, requir			minimum the IRS.	
		\$	10,232,450	distribu	tion for 2021		
		12a RMD d	ate	12b RMD	amount		
City or town, state or province, cour	try, and ZIP or foreign postal code			\$	3,6	94,801	
		13a Postpo	ned/late contrib.	13b Year	13c Code		
		\$	463				
		14a Repayr	nents	14b Code	•		
		\$	6,692				
Account number (see instructions)		15a FMV of assets	certain specified	15b Code	(s)		
		\$	1,596,734				
Form 5498 (Rev. April 2020)	(keep for your records)	www.irs.gov	/Form5498	Departn	nent of the T	reasury -	Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		than a	ontributions (other amounts in boxes 1–10, 13a, and 14a) 25,356,927	20	1545-0747 20 pril 2020)		IRA Contribution Information	
Total of all forms f	iled = 140,165,069	2 Rollov	er contributions	1			illiorillation	
		\$	688,219,713	Form	5498			
		3 Roth I amou	RA conversion nt		aracterized butions	•	Сору В	
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	\$	39,536,105	\$		467,933		
		5 FMV o	faccount	6 Life ins	surance cost i	ncluded in	For Participant	
		\$	13,787,251,000	\$		*		
PARTICIPANT'S name		7 _{IRA} [SEP 🗌	SIMPLE	Roth IF	RA 🗌	This information	
		8 SEP o	ontributions	9 SIMPI	LE contribut	ions	is being	
		\$	18,453,448	\$	12,4	166,301	furnished to	
Street address (including apt. no.)			10 Roth IRA contributions 11 If checked, required minim distribution for 2021				the IRS.	
		\$	35,856,724					
		12a RMD	date	12b RMD	amount			
City or town, state or province, cou	ntry, and ZIP or foreign postal code			\$		117,237		
			oned/late contrib.	13b Year	13c Code			
		\$	13,110					
		14a Repay	ments	14b Code				
		\$	83,921					
Account number (see instructions)		15a FMV o	of certain specified	15b Code	(s)			
		\$	160,667,915					
Form 5498 (Rev. April 2020)	(keep for your records)	www.irs.go	v/Form5498	Departn	nent of the T	reasury -	Internal Revenue Service	

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

		CIED			_	
PAYER'S/TRUSTEE'S name, street a country, ZIP or foreign postal code, a	address, city or town, state or province, and telephone no.	1 Gross distribu	ition	OMB No. 1545-1760		Payments From Qualified
Total of all forms filed = 3,706,242		\$	3,697,081	Form 1099-Q		Education
		2 Earnings (Rev. November 2019)			Program	
		Φ.	3,319,020	For calendar year 20		(Under Sections 529 and 530)
DAVEDIO (TRUOTEEIO TIN	DECIDIENTIO TINI	\$ • Di-	3,313,020			O A
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis	3,413,698	4 Trustee-to-trustee transfer		Copy A
		\$				For
RECIPIENT'S name		5 Distribution is	from:	6 Check if the recipient is not the designated		Internal Revenue
		Qualified tuition program—		beneficiary		Service Center
		Private	or State			File with Form 1096
Street address (including apt. no.)		Coverdell ESA				For Privacy Act
						and Paperwork Reduction Ac
City or town, state or province, country, and ZIP or foreign postal code						Notice, see the
						current Genera
Account number (see instructions)						Instructions for Certain Information
l '						Returns

Form 1099-Q (Rev. 11-2019)

Cat. No. 32223J

Www.irs.gov/Form1099Q

Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

	JURREC	/ I ⊑ U				
PAYER'S/TRUSTEE'S name, street address, city or town, state or country, ZIP or foreign postal code, and telephone no.	province,	1 Gross distribut	ion	OMB No. 1545-1760		Payments From
Total of all individuals represented = 2,600,132		\$	2,595,249	Form 1099-Q		Qualified Education
		2 Earnings (Rev. November 2019)			Programs	
		•	2,334,677	For calendar year 20		(Under Sections 529 and 530)
	- 1	\$	2,334,677			
PAYER'S/TRUSTEE'S TIN RECIPIENT'S TIN		3 Basis		4 Trustee-to-trustee transfer	_	Copy A
		\$	2,389,692	transiei		Foi
RECIPIENT'S name		5 Distribution is 1	rom:	6 Check if the recipier	nt is	Internal Revenue
		Qualified tuition program—		not the designated beneficiary		Service Center
		Private	or State			File with Form 1096
Street address (including apt. no.)		Coverdell ESA				For Privacy Act
						Reduction Ac
City or town, state or province, country, and ZIP or foreign postal code						Notice, see the
					current Genera	
Account number (see instructions)						Instructions for
, , ,						Certain Information Returns

Form 1099-Q (Rev. 11-2019)

Cat. No. 32223J

Www.irs.gov/Form1099Q

Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) UNID CORRECTED

PAYER'S/TRUSTEE'S name, street a country, ZIP or foreign postal code, a Total of all forms filed = 3	1 Gross distrib \$ 2 Earnings	ution 33,110,983	OMB No. 1545-1760 Form 1099-Q (Rev. November 2019)	Payments From Qualified Education Programs (Under Sections		
		\$	11,753,621	For calendar year 20		529 and 530)
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis	19,604,633	4 Trustee-to-trustee transfer		Copy A
RECIPIENT'S name		not the de		6 Check if the recipier not the designated beneficiary	nt is	Internal Revenue Service Center File with Form 1096
Street address (including apt. no.)		Coverdell ESA	A 📋			For Privacy Action and Paperwork Reduction Action
City or town, state or province, coun	try, and ZIP or foreign postal code					Notice, see the current Genera Instructions for
Account number (see instructions)						Certain Information Returns

Form 1099-Q (Rev. 11-2019)

Cat. No. 32223J

www.irs.gov/Form1099Q

Department of the Treasury - Internal Revenue Service

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Form W-2G

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

☐ CORRECTED

__ VOID

Cat. No. 10138V

3535

OMB No. 1545-0238 PAYER'S name, street address, city or town, province or state, country, 1 Reportable winnings 2 Date won and ZIP or foreign postal code 2020 15,727,617 3 Type of wager 4 Federal income tax withheld Form W-2G 938,834 Total of all forms filed = 15,760,056 Certain 6 Race 5 Transaction Gambling Winnings 7 Winnings from identical wagers 8 Cashier 18,198 PAYER'S telephone number PAYER'S federal identification number 9 Winner's taxpayer identification no 10 Window For Privacy Act and Paperwork Reduction Act WINNER'S name 11 First I.D. 12 Second I.D. Notice, see the 2020 General Instructions for **Certain Information** 14 State winnings Street address (including apt. no.) 13 State/Payer's state identification no Returns. City or town, province or state, country, and ZIP or foreign postal code 15 State income tax withheld 16 Local winnings File with Form 1096 17 Local income tax withheld 18 Name of locality Copy A For Internal Revenue **Service Center** 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 ▶

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www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

		LOTED		_
PAYER'S name, street at and ZIP or foreign postal	ddress, city or town, province or state, country,	1 Reportable winnings	2 Date won	OMB No. 1545-0238
and 2ii or loroigh pootal	0000	\$ 3,733,246		2020
Total of all	forms filed = 3,738,642	3 Type of wager	4 Federal income tax withheld \$ 503,381	Form W-2G
		5 Transaction	6 Race	Certain Gambling
PAYER'S federal identifica	ation number PAYER'S telephone number	7 Winnings from identical wagers \$ 12,433	8 Cashier	Winnings
		9 Winner's taxpayer identification no.	10 Window	For Privacy Ac and Paperwork Reduction Ac
WINNER'S name		11 First I.D.	12 Second I.D.	Notice, see the 2020 Genera Instructions for
Street address (including	apt. no.)	13 State/Payer's state identification no.	14 State winnings	Certain Information Returns
City or town, province or	state, country, and ZIP or foreign postal code	15 State income tax withheld	16 Local winnings	File with Form 1096
		17 Local income tax withheld	18 Name of locality	Copy A For Internal Revenue Service Center
	ry, I declare that, to the best of my knowledge he recipient of this payment and any payments from	and belief, the name, address, ar		
Signature ▶			Date ►	
Form W-2G	Cat. No. 10138V	www.irs.gov/FormW2G	Department of the Treasury -	Internal Revenue Service

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www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

Form W-2G

Cat. No. 10138V

PAYER'S name, street address, city or		1 Reportable winnings	2 Date won	OMB No. 1545-0238	
and ZIP or foreign postal code		\$ 51,602,118		2020	
Total of all forms filed	= 15.760.056	3 Type of wager	4 Federal income tax withheld \$ 2,010,307	Form W-2G	
		5 Transaction	6 Race	Certain Gambling	
PAYER'S federal identification number	PAYER'S telephone number	7 Winnings from identical wagers \$ 60,518	8 Cashier	Winnings	
	·	9 Winner's taxpayer identification no.	10 Window	For Privacy Act and Paperwork Reduction Act	
WINNER'S name		11 First I.D.	12 Second I.D.	Notice, see the 2020 General Instructions for Certain Information	
Street address (including apt. no.)		13 State/Payer's state identification no.	14 State winnings	Returns.	
City or town, province or state, country	, and ZIP or foreign postal code	15 State income tax withheld	16 Local winnings	File with Form 1096	
		17 Local income tax withheld	18 Name of locality	Copy A For Internal Revenue Service Center	
Under penalties of perjury, I declare t correctly identify me as the recipient of Signature ▶		om identical wagers, and that no o			

Do Not Cut or Separate Forms on This Page - Do Not Cut or Separate Forms on This Page

www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

Form **8596**(Rev. August 2013)
Internal Revenue Service

Department of the Treasury

Total of all forms filed = 3,402

Information Return for Federal Contracts

Submit with Form 8596-A.

1	Name and address of contra	actor	Contractor's taxpayer identification number			
3	Name of common parent, if	applicable (See instructions.)	4 Common parent's employer identification number, if applicable (See instructions.)			
5 Name of Federal executive agency			6	Federal executive age identification number	ncy's employer	
7	Date of contract action	8 Expected date of contract completion	9	Total amount obligated	d under the contract 3,402	
10	Contract number	11 Agency code	12	Contract office number	13 Contract modification number	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form 8596 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form8596.

Purpose of form. Section 6050M and Regulations section 1.6050M-1 require certain Federal executive agencies to file a return to report information about persons with whom they have entered into contracts. If you are not filing electronically and you have not made the Federal Procurement Data Center (FPDC) election, explained later, use **Forms 8596** and **8596-A**, Quarterly Transmittal of Information Returns for Federal Contracts, to furnish the required information.

How to file. If you file 250 or more reportable contracts during a 1-year period, you must file Form 8596 electronically for each quarter of that 1-year period. For information on filing electronically, see Pub. 1516, Specifications for Filing Form 8596, Information Return for Federal Contracts, Electronically. If you expect to enter into fewer than 250 reportable contracts during a 1-year period, you may file paper Forms 8596 and 8596-A.



The IRS encourages you to file electronically even though you have fewer than 250 reportable contracts.

When to file. You must file Forms 8596 quarterly. The due dates for each quarter are shown below. Do not file before the end of the quarter.

QuarterDue DateJanuary, February, MarchApril 30April, May, JuneJuly 31July, August, SeptemberOctober 31October, November, DecemberJanuary 31

If the regular due date falls on a Saturday, Sunday, or legal holiday, file by the next business day.

Where to file. File Forms 8596 and 8596-A with Internal Revenue Service, Attn: 8596, Enterprise Computing Center at Martinsburg, (IRS/ECC-MTB), 230 Murall Drive, P.O. Box 1359, Kearneysville, West Virginia 25430.

Who must file. The head of every Federal executive agency or his or her delegate must file Forms 8596 and 8596-A to report federal contracts.

Federal executive agency. A Federal executive agency is (a) any executive agency, as defined in 5 U.S.C. 105, other than the Government Accountability Office, (b) any military department, as defined in 5 U.S.C. 102, and (c) the United States Postal Service and the Postal Rate Commission.

Special rules. If a subcontract is entered into by the Small Business Administration (SBA) under a prime contract between the SBA and a procuring agency under section 8(a) of the Small Business Act, the procuring agency, not the SBA, must file Forms 8596 and 8596-A.

A Federal Supply Schedule Contract or an Automated Data Processing Schedule Contract entered into by the General Services Administration (GSA), or a schedule contract entered into by the Department of Veterans Affairs (VA) on behalf of one or more Federal executive agencies, is not to be reported by the GSA or the VA at the time of execution. Rather, when a Federal executive agency, including the GSA or the VA, places an order under a schedule contract, then the Federal executive agency must file Forms 8596 and 8596-A.

FPDC election. In complying with the requirements of the Federal Procurement Data System, if you are required to submit to the FPDC the same contract information that is required by Forms 8596 and 8596-A, you may elect to have the FPDC file Forms 8596 and 8596-A on your behalf for contracts required to be reported to the FPDC. If you make the election, your agency must not file directly with the IRS to report those contracts required to be submitted to the FPDC. However, you must file with the IRS for any contracts that are required to be reported to the IRS but are not required to be submitted to the FPDC.

To make this election, attach to your FPDC submission for the quarter a signed statement that (a) the Director of the FPDC (or his or her delegate) is authorized, in accordance with an election made under 26 CFR 1.6050M-1(d)(5), on the agency's behalf, to make the required returns for that quarter and (b)

Cat. No. 12306H www.irs.gov/form8596 Form **8596** (Rev. 8-2013)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

Form **8596**(Rev. August 2013)
Internal Revenue Service
Department of the Treasury

Total of all forms filed = 3,014

Information Return for Federal Contracts

Submit with Form 8596-A.

1	Name and address of contra	actor	2 Contractor's taxpayer identification number			
3	Name of common parent, if	applicable (See instructions.)	4 Common parent's employer identification number, if applicable (See instructions.)			
5	Name of Federal executive a	agency	6 Federal executive agency's employer identification number			
7	Date of contract action	8 Expected date of contract completion	9 Total amount obligated \$	d under the contract 3,014		
10	Contract number	11 Agency code	12 Contract office number	13 Contract modification number		

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form 8596 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form8596.

Purpose of form. Section 6050M and Regulations section 1.6050M-1 require certain Federal executive agencies to file a return to report information about persons with whom they have entered into contracts. If you are not filing electronically and you have not made the Federal Procurement Data Center (FPDC) election, explained later, use **Forms 8596** and **8596-A**, Quarterly Transmittal of Information Returns for Federal Contracts, to furnish the required information.

How to file. If you file 250 or more reportable contracts during a 1-year period, you must file Form 8596 electronically for each quarter of that 1-year period. For information on filing electronically, see Pub. 1516, Specifications for Filing Form 8596, Information Return for Federal Contracts, Electronically. If you expect to enter into fewer than 250 reportable contracts during a 1-year period, you may file paper Forms 8596 and 8596-A.



The IRS encourages you to file electronically even though you have fewer than 250 reportable contracts.

When to file. You must file Forms 8596 quarterly. The due dates for each quarter are shown below. Do not file before the end of the quarter.

QuarterDue DateJanuary, February, MarchApril 30April, May, JuneJuly 31July, August, SeptemberOctober 31October, November, DecemberJanuary 31

If the regular due date falls on a Saturday, Sunday, or legal holiday, file by the next business day.

Where to file. File Forms 8596 and 8596-A with Internal Revenue Service, Attn: 8596, Enterprise Computing Center at Martinsburg, (IRS/ECC-MTB), 230 Murall Drive, P.O. Box 1359, Kearneysville, West Virginia 25430.

Who must file. The head of every Federal executive agency or his or her delegate must file Forms 8596 and 8596-A to report federal contracts.

Federal executive agency. A Federal executive agency is (a) any executive agency, as defined in 5 U.S.C. 105, other than the Government Accountability Office, (b) any military department, as defined in 5 U.S.C. 102, and (c) the United States Postal Service and the Postal Rate Commission.

Special rules. If a subcontract is entered into by the Small Business Administration (SBA) under a prime contract between the SBA and a procuring agency under section 8(a) of the Small Business Act, the procuring agency, not the SBA, must file Forms 8596 and 8596-A.

A Federal Supply Schedule Contract or an Automated Data Processing Schedule Contract entered into by the General Services Administration (GSA), or a schedule contract entered into by the Department of Veterans Affairs (VA) on behalf of one or more Federal executive agencies, is not to be reported by the GSA or the VA at the time of execution. Rather, when a Federal executive agency, including the GSA or the VA, places an order under a schedule contract, then the Federal executive agency must file Forms 8596 and 8596-A.

FPDC election. In complying with the requirements of the Federal Procurement Data System, if you are required to submit to the FPDC the same contract information that is required by Forms 8596 and 8596-A, you may elect to have the FPDC file Forms 8596 and 8596-A on your behalf for contracts required to be reported to the FPDC. If you make the election, your agency must not file directly with the IRS to report those contracts required to be submitted to the FPDC. However, you must file with the IRS for any contracts that are required to be reported to the IRS but are not required to be submitted to the FPDC.

To make this election, attach to your FPDC submission for the quarter a signed statement that (a) the Director of the FPDC (or his or her delegate) is authorized, in accordance with an election made under 26 CFR 1.6050M-1(d)(5), on the agency's behalf, to make the required returns for that quarter and (b)

Cat. No. 12306H www.irs.gov/form8596 Form **8596** (Rev. 8-2013)

2020 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)

Form **8596**(Rev. August 2013)
Internal Revenue Service
Department of the Treasury

Total of all forms filed = 3,402

Information Return for Federal Contracts

Submit with Form 8596-A.

1	Name and address of contra	actor	2 Contractor's taxpayer identification number					
3	Name of common parent, if	applicable (See instructions.)	Common parent's employer identification number, if applicable (See instructions.)					
5 Name of Federal executive agency			6 Federal executive agency's employer identification number					
7	Date of contract action	8 Expected date of contract completion	9 Total amount obligated under the contract \$ 958,985					
10	Contract number	11 Agency code	12 Contract office number	13 Contract modification number				

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form 8596 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/form8596.

Purpose of form. Section 6050M and Regulations section 1.6050M-1 require certain Federal executive agencies to file a return to report information about persons with whom they have entered into contracts. If you are not filing electronically and you have not made the Federal Procurement Data Center (FPDC) election, explained later, use **Forms 8596** and **8596-A**, Quarterly Transmittal of Information Returns for Federal Contracts, to furnish the required information.

How to file. If you file 250 or more reportable contracts during a 1-year period, you must file Form 8596 electronically for each quarter of that 1-year period. For information on filing electronically, see Pub. 1516, Specifications for Filing Form 8596, Information Return for Federal Contracts, Electronically. If you expect to enter into fewer than 250 reportable contracts during a 1-year period, you may file paper Forms 8596 and 8596-A.



The IRS encourages you to file electronically even though you have fewer than 250 reportable contracts.

When to file. You must file Forms 8596 quarterly. The due dates for each quarter are shown below. Do not file before the end of the quarter.

QuarterDue DateJanuary, February, MarchApril 30April, May, JuneJuly 31July, August, SeptemberOctober 31October, November, DecemberJanuary 31

If the regular due date falls on a Saturday, Sunday, or legal holiday, file by the next business day.

Where to file. File Forms 8596 and 8596-A with Internal Revenue Service, Attn: 8596, Enterprise Computing Center at Martinsburg, (IRS/ECC-MTB), 230 Murall Drive, P.O. Box 1359, Kearneysville, West Virginia 25430.

Who must file. The head of every Federal executive agency or his or her delegate must file Forms 8596 and 8596-A to report federal contracts.

Federal executive agency. A Federal executive agency is (a) any executive agency, as defined in 5 U.S.C. 105, other than the Government Accountability Office, (b) any military department, as defined in 5 U.S.C. 102, and (c) the United States Postal Service and the Postal Rate Commission.

Special rules. If a subcontract is entered into by the Small Business Administration (SBA) under a prime contract between the SBA and a procuring agency under section 8(a) of the Small Business Act, the procuring agency, not the SBA, must file Forms 8596 and 8596-A.

A Federal Supply Schedule Contract or an Automated Data Processing Schedule Contract entered into by the General Services Administration (GSA), or a schedule contract entered into by the Department of Veterans Affairs (VA) on behalf of one or more Federal executive agencies, is not to be reported by the GSA or the VA at the time of execution. Rather, when a Federal executive agency, including the GSA or the VA, places an order under a schedule contract, then the Federal executive agency must file Forms 8596 and 8596-A.

FPDC election. In complying with the requirements of the Federal Procurement Data System, if you are required to submit to the FPDC the same contract information that is required by Forms 8596 and 8596-A, you may elect to have the FPDC file Forms 8596 and 8596-A on your behalf for contracts required to be reported to the FPDC. If you make the election, your agency must not file directly with the IRS to report those contracts required to be submitted to the FPDC. However, you must file with the IRS for any contracts that are required to be reported to the IRS but are not required to be submitted to the FPDC.

To make this election, attach to your FPDC submission for the quarter a signed statement that (a) the Director of the FPDC (or his or her delegate) is authorized, in accordance with an election made under 26 CFR 1.6050M-1(d)(5), on the agency's behalf, to make the required returns for that quarter and (b)

Cat. No. 12306H www.irs.gov/form8596 Form **8596** (Rev. 8-2013)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

651119

	Total of all forms filed = 23,376,816	☐ Final K-1 ☐ Amended K-1 ☐ OMB No. 1545-0123						
Schedule K-1 20 20			Part III Partner's Share of Current Year Income,					
(Form 1065)			Deductions, Credits, and Other Items					
	tment of the Treasury al Revenue Service For calendar year 2020, or tax year	1	Ordinary	business income (loss)	15	Credits		
		2	Not ronto	10,580,253				
Par	tner's Share of Income, Deductions,	_	Net renta	6,939,618				
	dits, etc. See separate instructions.	3	Other ne	t rental income (loss)	16	Foreign transactions		
	, <u> </u>	4a	Cuarante	378,487				
A	art I Information About the Partnership Partnership's employer identification number	4a	Guarante	eed payments for services				
		4b	Guarante	eed payments for capital				
В	Partnership's name, address, city, state, and ZIP code	4c	Total gua	aranteed payments 719,628				
		5	Interest i	ncome 6,642,695				
С	IRS Center where partnership filed return ▶	6-	Oudinan					
D	Check if this is a publicly traded partnership (PTP) art II Information About the Partner	6a	Ordinary	dividends 3,356,089				
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)	6b	Qualified	dividends				
-	Faither's 33N or This (Do not use This or a disregarded entity. See instructions.)	"	Quaoo	amasmas				
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions.	6с	Dividend	equivalents 95,728	17	Alternative minimum tax (AMT) items		
		7	Royalties	615,226				
G	General partner or LLC Limited partner or other LLC member-manager member	8	Net shor	t-term capital gain (loss) 2,201,144				
H1 H2	Domestic partner	9a	Net long	-term capital gain (loss) 2,711,268	18	Tax-exempt income and nondeductible expenses		
112	☐ If the partner is a disregarded entity (DE), enter the partner's: TIN Name	9b	Collectib	les (28%) gain (loss)				
11	What type of entity is this partner?							
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	9с	Unrecap	tured section 1250 gain				
J	Partner's share of profit, loss, and capital (see instructions): Beginning Ending	40	Not cost	ion 1001 main (loca)				
		10	Net sect	on 1231 gain (loss)	19	Distributions		
	Profit % % Loss % %	11	Other inc	come (loss)		Distributions		
	Capital % %			7,430				
	Check if decrease is due to sale or exchange of partnership interest							
					20	Other information		
K	Partner's share of liabilities:	12	Section	179 deduction				
	Beginning Ending 5,600,177 6 -	13	Other de	367,940				
	Nonrecourse \$	'	Other de	7,565				
	Qualified nonrecourse financing \$ 2,791,901 \$ 2,923,098			-,000				
	Recourse \$ 3,088,464 \$ -							
	Check this box if Item K includes liability amounts from lower tier partnerships.							
L	Partner's Capital Account Analysis							
		14	Self-emp	ployment earnings (loss)				
	Beginning capital account \$							
	Capital contributed during the year \$							
	Current year net income (loss) \$	21	More	than one activity for at-risk	nurna	ses*		
	Other increase (decrease) (attach explanation) \$ Withdrawals & distributions \$ ()	22	=	than one activity for passiv				
	Ending capital account \$			ned statement for add		* ' '		
М	Did the partner contribute property with a built-in gain or loss?	o l						
	Yes No If "Yes," attach statement. See instructions.	Jse						
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)	For IRS Use Only						
	Beginning	۲. ⊩						
	Fnding \$	ıй						

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

651119

	Total of all individuals represented	= 12,601,021		Final K-1	Amended	K-1	OMB No. 1545-0123
Sch	edule K-1	2020	Pa				rent Year Income,
(Foi	m 1065)	<u> </u>		Dec	ductions, Credi	ts, a	nd Other Items
	rtment of the Treasury al Revenue Service For ca	lendar year 2020, or tax year	1	Ordinary busin	ness income (loss) 6,917,292	15	Credits
_	beginning / / 2020 endir	<u> </u>	2	Net rental real	estate income (loss) 4,166,757		
	tner's Share of Income, Deductions, etc. See separate in	•	3	Other net rent	tal income (loss) 316,397	16	Foreign transactions
	art I Information About the Part	nership	4a	Guaranteed p	ayments for services		
Α	Partnership's employer identification number		1	'	•		
В	Partnership's name, address, city, state, and ZIP	code	4b	Guaranteed p	ayments for capital		
	authoral portaine, addresse, only, enate, and En	0040	4c	Total guarante	eed payments 670,785		
			5	Interest incom	ne 3,857,578		
C	IRS Center where partnership filed return ▶	(DTD)	60	Ordinary divid			
D	Check if this is a publicly traded partnership art II Information About the Part		6a	Ordinary divid	2,236,018		
E	Partner's SSN or TIN (Do not use TIN of a disrega		6b	Qualified divid	dends		
	· · · · · · · · · · · · · · · · · · ·	, 	6c	Dividend equi	ivalents	17	Alternative minimum tax (AMT) items
F	Name, address, city, state, and ZIP code for partne	r entered in E. See instructions.		Dividoria oqui	77,131	''	7 Hornauvo minimam tax (WVV) Kono
			7	Royalties	449,796		
G	General partner or LLC Limite member-manager member	ed partner or other LLC per	8	Net short-tern	n capital gain (loss) 1,572,998		
H1 H2	☐ Domestic partner ☐ Foreig☐ ☐ If the partner is a disregarded entity (DE), ent	gn partner er the partner's:	9a	Net long-term	n capital gain (loss) 1,631,665	18	Tax-exempt income and nondeductible expenses
			9b	Collectibles (2	28%) gain (loss)		
11	What type of entity is this partner?		0-	Linus agent was	Location 1050 main		
12 J	If this partner is a retirement plan (IRA/SEP/Keogle Partner's share of profit, loss, and capital (see ins		9c	Unrecaptured	l section 1250 gain		
	Beginning	Ending	10	Net section 12	231 gain (loss)		
	Profit %	%_				19	Distributions
	Loss %	%	11	Other income			
	Capital %	<u>%</u>			6,236		
	Check if decrease is due to sale or exchange of p	artnership interest				20	Other information
ĸ	Partner's share of liabilities:		12	Section 179 d	leduction		
``	Beginning	Ending			335,505		
	Nonrecourse \$ 3,009,975	\$ -	13	Other deducti	ions		
	Qualified nonrecourse	5 _{\$} 1,554,344			6,555		
	financing \$ 1,300,300. Recourse \$ 2,118,250.	Ψ					
	Check this box if Item K includes liability amount	•					
L	Partner's Capital Account	Analysis					
			14	Self-employm	nent earnings (loss)		
	Beginning capital account \$					-	
	Capital contributed during the year \$						
	Current year net income (loss) \$ Other increase (decrease) (attach explanation) \$		21	More than	one activity for at-risk	COURD	
	Withdrawals & distributions \$ (22	=	one activity for passiv		
	Ending capital account \$	*Se		statement for add			
	<u> </u>	_					
М	Did the partner contribute property with a built-in	Use Only					
	Yes No If "Yes," attach statement. See instructions.						
N	Partner's Share of Net Unrecognized Secti		3S (
	Beginning	_	For IRS				
l	Ending \$		L L				

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

651119

Total of all forms filed = 23,376,816			Final K-1	Amended	K-1	OMB No. 1545-0123		
Schedule K-1 20 20				Share of	Cur	rent Year Income,		
(Form 1065)			Deductions, Credits, and Other Items					
	rtment of the Treasury al Revenue Service For calendar year 2020, or tax year	1	Ordinary business inco	me (loss) 32,818,481	15	Credits		
D	beginning / / 2020 ending / /	2	Net rental real estate in	come (loss)				
	tner's Share of Income, Deductions, dits, etc. See separate instructions.	3	Other net rental incom	e (loss) 1,228,886	16	Foreign transactions		
	art I Information About the Partnership	4a	Guaranteed payments					
Α	Partnership's employer identification number		, ,					
В	Partnership's name, address, city, state, and ZIP code	4b	Guaranteed payments	for capital				
	raitheiship s hame, address, only, state, and zir code	4c	Total guaranteed payn	nents 71,062,116				
		5	Interest income					
С	IRS Center where partnership filed return ▶			31,361,338				
D	Check if this is a publicly traded partnership (PTP)	6a	Ordinary dividends					
P	art II Information About the Partner			32,790,788				
E	Partner's SSN or TIN (Do not use TIN of a disregarded entity. See instructions.)	6b	Qualified dividends					
F	Name, address, city, state, and ZIP code for partner entered in E. See instructions.	6с	Dividend equivalents	153,182	17	Alternative minimum tax (AMT) items		
		7	Royalties	6,964,970				
G	General partner or LLC Limited partner or other LLC member-manager member	8	Net short-term capital	gain (loss) 7,397,941				
H1 H2	Domestic partner If the partner is a disregarded entity (DE), enter the partner's:	9a	Net long-term capital o	gain (loss)	18	Tax-exempt income and nondeductible expenses		
	TIN Name	9b	Collectibles (28%) gair	ı (loss)				
11	What type of entity is this partner?							
12	If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here	9с	Unrecaptured section	1250 gain				
J	Partner's share of profit, loss, and capital (see instructions):							
	Beginning Ending	10	Net section 1231 gain	(loss)				
	Profit % %				19	Distributions		
	Loss % %	11	Other income (loss)	00.400				
	Capital % %			28,198				
	Check if decrease is due to sale or exchange of partnership interest							
					20	Other information		
K	Partner's share of liabilities:	12	Section 179 deduction	5,361,947				
	Beginning Ending Newscause 6 1,383,331,280 6 0	40	Otto	3,301,347				
	Nonrecourse \$ 1,383,331,280 \$ 0	13	Other deductions	18,669				
	Qualified nonrecourse financing \$ 1,744,732,939 \$ 1,878,478,443			10,009				
	financing \$ 1,744,732,939 \$ 1,076,476,443 Recourse \$ 1,202,916,026 \$ 0							
	Check this box if Item K includes liability amounts from lower tier partnerships.							
L	Partner's Capital Account Analysis							
-	Fartilet 3 Oapital Account Analysis	14	Self-employment earni	ngs (loss)				
	Beginning capital account \$. ,				
	Capital contributed during the year \$							
	Current year net income (loss) \$							
	Other increase (decrease) (attach explanation) \$	21	More than one acti	vity for at-risk	purpo	oses*		
	Withdrawals & distributions \$ ()	22	More than one acti	vity for passiv	e activ	vity purposes*		
	Ending capital account \$	*Se	e attached statem	ent for add	litiona	al information.		
		Ş						
М	Did the partner contribute property with a built-in gain or loss?	Only						
	Yes No If "Yes," attach statement. See instructions.	Use						
N	Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss)	For IRS Use						
	Beginning	or =						
	Ending \$	F.						

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

661117

Total of all forms filed = 3,085,665		Final K-1	Amend	led K-1	OMB No. 1545-0092
Cohodula K 1		rt III			of Current Year Income,
(Form 1041) 20 20	Ге	iic iii			and Other Items
Department of the Treasury For calendar year 2020, or tax year Internal Revenue Service	1	Interest in	· · · · · · · · · · · · · · · · · · ·	11	Final year deductions
Internal Revenue Service			1,015,331		
beginning / / ending / /	2a	Ordinary	dividends 1,224,638		
Beneficiary's Share of Income, Deductions,	2b	Qualified	dividends	 	
Credits, etc. See back of form and instructions.	20	Qualified	aividends		
	3	Net short	-term capital gain		
Part I Information About the Estate or Trust A Estate's or trust's employer identification number	ľ	INCL SHOLL	91,131		
A Estate's or trust's employer identification number	4a	Net long-	term capital gain		
B Estate's or trust's name	4b	28% rate	<u> </u>	12	Alternative minimum tax adjustment
	4c	Unrecapt	ured section 1250 gain	<u> </u>	
		Other po	rtfolio and		
C Fiduciary's name, address, city, state, and ZIP code	5		ess income 482,624		
	6	Ordinary	business income 103,501		
	7	Net renta	I real estate income 279,775	13	Credits and credit recapture
	8	Other ren	ital income		
	9	Directly a	pportioned deductions		
D Check if Form 1041-T was filed and enter the date it was filed					
				14	Other information
E Check if this is the final Form 1041 for the estate or trust					1,858,170
Part II Information About the Beneficiary	10	Estate ta	x deduction		
F Beneficiary' identifying number				i	
G Beneficiary's name, address, city, state, and ZIP code					
	*Se	e attach	ed statement for a	dditic	nal information.
	1		tement must be at		
					directly apportioned
	ded	ductions	from each busines	s, rer	ntal real estate, and
	oth	er rental	activity.		
	>				
	l C				
	se (
	۱ä				
	<u>R</u>				
H Domestic beneficiary Foreign beneficiary	For IRS Use Only				

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

www.irs.gov/Form1041

Cat. No. 11380D

Schedule K-1 (Form 1041) 2020

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

661117

Total of all individuals represented = 2,654,119		Final K-1		Amend	led K-1	OMB No. 1545-0092
Schedule K-1 (Form 1041) 2020	Pa	art III				of Current Year Income,
Department of the Treasury For calendar year 2020, or tax year	1	Interest		ions, Cre	dits,	and Other Items Final year deductions
Internal Revenue Service	'	Interest	income	930,909	''	Tillar year deddelions
beginning / / ending / /	2a	Ordinary	dividends 1	,043,892		
Beneficiary's Share of Income, Deductions, Credits, etc. > See back of form and instructions.	2b	Qualified	d dividends			
Part I Information About the Estate or Trust	3	Net shor	t-term capita	al gain		
A Estate's or trust's employer identification number				87,534		
	4a	Net long	-term capita	l gain 345,837		
B Estate's or trust's name	4b	28% rate	e gain		12	Alternative minimum tax adjustment
	4c	Unrecap	tured section	n 1250 gain		
C Fiduciary's name, address, city, state, and ZIP code	- 5		ortfolio and ness income	449,898		
	6	Ordinary	business in	come 94,662		
	7	Net renta	al real estate	income 257,676	13	Credits and credit recapture
	8	Other re	ntal income	12,024		T
	9	Directly a	apportioned d		_	
D Check if Form 1041-T was filed and enter the date it was filed						
					14	Other information
E Check if this is the final Form 1041 for the estate or trust						1,609,293
Part II Information About the Beneficiary	10	Estate ta	ax deduction			
F Beneficiary' identifying number						
G Beneficiary's name, address, city, state, and ZIP code						
	*Se	ee attach	ned stater	nent for a	dditio	nal information.
	bei de	neficiary ductions	's share o	of income	and d	d showing the directly apportioned ntal real estate, and
	For IRS Use Only					
	Use					
	RS					
H Domestic beneficiary Foreign beneficiary	For					

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Cat. No. 11380D

Schedule K-1 (Form 1041) 2020

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

661117 Total of all forms filed = 3,085,665 Final K-1 OMB No. 1545-0092 Amended K-1 Schedule K-1 Beneficiary's Share of Current Year Income, Part III (Form 1041) **Deductions, Credits, and Other Items** Department of the Treasury For calendar year 2020, or tax year Final year deductions Interest income Internal Revenue Service 3,577,947 Ordinary dividends ending beginning 24,764,381 Beneficiary's Share of Income, Deductions, 2b Qualified dividends Credits, etc. ► See back of form and instructions **Information About the Estate or Trust** 3 Net short-term capital gain Part I 560.625 A Estate's or trust's employer identification number 4a Net long-term capital gain 13,448,566 28% rate gain B Estate's or trust's name 4b Alternative minimum tax adjustment 4c Unrecaptured section 1250 gain Other portfolio and 5 C Fiduciary's name, address, city, state, and ZIP code nonbusiness income 10,702,731 6 Ordinary business income 4,951,062 Net rental real estate income 10,816,915 Credits and credit recapture Other rental income 8 184,037 Directly apportioned deductions Check if Form 1041-T was filed and enter the date it was filed Other information 16,452,807 Check if this is the final Form 1041 for the estate or trust Estate tax deduction Information About the Beneficiary Part II Beneficiary' identifying number G Beneficiary's name, address, city, state, and ZIP code *See attached statement for additional information. Note: 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. IRS Use Only

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

Foreign beneficiary

н

Domestic beneficiary

Po

Cat. No. 11380D

Schedule K-1 (Form 1041) 2020

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

671120

Total of all forms filed = 8,111,239		Final K-	1 [Amended	l K-1	OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 2020	Pa					urrent Year Income, Other Items
Department of the Treasury For calendar year 2020, or tax year	1		business incor		13	Credits
Internal Revenue Service		NI-tt		7,387,360		319,729
beginning / / 2020 ending / /	2	Net renta	al real estate in	707,608		
Shareholder's Share of Income, Deductions,	3	Other ne	t rental income			
Credits, etc. ▶See separate instructions.				58,310		
Part I Information About the Corporation	4	Interest i		. =		
	5a	Ordinary	dividends	1,704,617		
A Corporation's employer identification number	"	0.4	amasnas	305,226		
B Corporation's name, address, city, state, and ZIP code	5b	Qualified	dividends		14	Foreign transactions
		Danakia				
	6	Royalties	5	53,351		
	7	Net shor	t-term capital o		1	
				133,775		
C IRS Center where corporation filed return	8a	Net long	-term capital ga			
	8b	Collectit	oles (28%) gain	(loss)		
Part II Information About the Shareholder	"		(==7.7) g	()		
D Shareholder's identifying number	8c	Unrecap	tured section 1	250 gain		
E Shareholder's name, address, city, state, and ZIP code	9	Net sect	ion 1231 gain (l	loss)		
	10	Other inc	come (loss)		15	Alternative minimum tax (AMT) items
F Current year allocation percentage %						
G Shareholder's number of shares						
Beginning of tax year						
	11	Section	179 deduction		16	Items affecting shareholder basis
H Loans from shareholder	10	041	-l 4t	598,154		
Beginning of tax year \$ End of tax year	12	Other de	eductions			
≥					17	Other information
O es						
For IRS Use Only						
For L						
	18	☐ More	than one activ	ity for at-risl	k purpo	pses*
	19	_	than one activ	-		
		* See	attached st	atement 1	for ad	ditional information.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

671120

Total of all individuals represented = 6,740,576		Final K-1 Amended		OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 20 20	Pa	rt III Shareholder's Share Deductions, Credits		
Department of the Treasury Internal Revenue Service For calendar year 2020, or tax year	1	Ordinary business income (loss)	13	Credits
0000	2	6,348,825 Net rental real estate income (loss)		278,479
beginning / / 2020 ending / /		601,267		
Shareholder's Share of Income, Deductions,	3	Other net rental income (loss)		
Credits, etc. ▶See separate instructions.		53,596		
<u></u>	4	Interest income		
Part I Information About the Corporation		1,546,809		
A Corporation's employer identification number	5a	Ordinary dividends 283,291		
B Corporation's name, address, city, state, and ZIP code	5b	Qualified dividends	14	Foreign transactions
	6	Royalties		
		48,074		
	7	Net short-term capital gain (loss)		
	<u> </u>	125,348		
C IRS Center where corporation filed return	8a	Net long-term capital gain (loss) 255,530		
	8b	Collectibles (28%) gain (loss)		
Part II Information About the Shareholder		3(,		
D Shareholder's identifying number	8c	Unrecaptured section 1250 gain		
E Shareholder's name, address, city, state, and ZIP code	9	Net section 1231 gain (loss)		
	10	Other income (loss)	15	Alternative minimum tax (AMT) items
F Current year allocation percentage				
G Shareholder's number of shares				
Beginning of tax year				
End of tax year	11	Section 179 deduction	16	Items affecting shareholder basis
H Loans from shareholder	12	573,242 Other deductions		
Beginning of tax year \$				
	-			
<u> </u>			17	Other information
O es C				
For IRS Use Only				
Ď.				
	18 19	More than one activity for at-ris More than one activity for passi		
	13	iviore than one activity for passi	ve acill	vity purposes
		* See attached statement	for ad	lditional information.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

671120

Total of all forms filed = 8,111,239		Final K-		Amended		OMB No. 1545-0123
Schedule K-1 (Form 1120-S) 20 20	Pa		Shareholder' Deductions,			urrent Year Income, Other Items
Department of the Treasury For calendar year 2020, or tax year Internal Revenue Service	1	Ordinary	business income	e (loss) 718,263	13	Credits 3,589,663
beginning / / 2020 ending / /	2	Net renta	al real estate inco			-,,
Shareholder's Share of Income, Deductions,	3	Other ne	11,9 et rental income (le	983,696 oss)		
Credits, etc. ▶See separate instructions.			,	011,941		
Part I Information About the Corporation	4	Interest i		506 003		
A Corporation's employer identification number	5a	Ordinary	dividends	686,002		
Corporation's employer identification number				537,294		
B Corporation's name, address, city, state, and ZIP code	5b	Qualified	d dividends		14	Foreign transactions
	6	Royalties				
	7	Net shor	t-term capital gai	n (loss)		
	'	Trot onor		B26,241		
C IRS Center where corporation filed return	8a	Net long	-term capital gain	•		
·				173,475		
Part II Information About the Shareholder	8b	Collectib	oles (28%) gain (lo	oss)		
D Shareholder's identifying number	8c	Unrecap	tured section 125	0 gain		
E Shareholder's name, address, city, state, and ZIP code	9	Net sect	ion 1231 gain (los	ss)		
	10	Other inc	come (loss)		15	Alternative minimum tax (AMT) items
F Current year allocation percentage %						
G Shareholder's number of shares Beginning of tax year						
End of tax year						
	11	Section	179 deduction		16	Items affecting shareholder basis
H Loans from shareholder	10	Otherwale		202,355		
Beginning of tax year \$ End of tax year \$	12	Otner de	eductions			
					17	Other information
γίπο						
Use						
For IRS Use Only						
Ō						
	18	_	than one activity			
	19	More	than one activity	for passiv	e activ	rity purposes*
		* See	attached stat	tement f	or ad	ditional information.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

Nonompleyee	OMB No. 1545-0116				PAYER'S name, street address, city or town, state or province, country, or foreign postal code, and telephone no.			
Nonemployee Compensation	2020				Total of all forms filed = 33,689,276			
	Form 1099-NEC							
Copy B For Recipient	33,365,471	ensation	Nonemployee comper	1				
_ Tor necipient				2	PIENT'S TIN	RECIPIE	R'S TIN	
This is important tax information and is being furnished to				3	RECIPIENT'S name			
the IRS. If you are required to file a return, a negligence penalty or other sanction may be	114,946	vithheld		4	Street address (including apt. no.)			
imposed on you if this income is taxable and the IRS determines that it has					City or town, state or province, country, and ZIP or foreign postal code			
not been reported.					FATCA filir requiremen			
7 State income	State/Payer's state no.	6	State tax withheld		·		ount number (see instructions)	
\$ \$				\$				

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

				PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all individuals represented = 23,239,614			
1099-NEC							
23,099,944	ation	onemployee compen	1 Nor \$				
			2		RECIPIENT'S TIN	'S TIN	
			3	RECIPIENT'S name			
109,828	held	ederal income tax wit	4 Fe \$		Street address (including apt. no.)		
					City or town, state or province, country, and ZIP or foreign postal code		
				FATCA filing requirement			
ayer's state no.	6 State/Pa	ate tax withheld				nt number (see instructions)	
			\$ \$				
	20 099-NEC 23,099,944 109,828	23,099,944	Form 1099-NEC Temployee compensation 23,099,944 deral income tax withheld 109,828	Form 1099-NEC 1 Nonemployee compensation \$ 23,099,944 2 3 4 Federal income tax withheld \$ 109,828 5 State tax withheld \$ 6 State/Payer's state no.	Form 1099-NEC 1 Nonemployee compensation \$ 23,099,944 2 4 Federal income tax withheld \$ 109,828 FATCA filing requirement 5 State tax withheld \$ 6 State/Payer's state no. \$	sented = 23,239,614 The image is province, county, 21	

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

Nonemployee Compensation	(OMB No. 1545-0116	•			PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 33,689,276				
		Form 1099-NEC								
Copy B For Recipient		592,262,114	nsation	onemployee compens	1 N \$					
r or riecipiem					2	RECIPIENT'S TIN	'S TIN F	PAYER'S T		
This is important tax information and is being furnished to					3	RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				
the IRS. If you are required to file a return, a negligence penalty or othe sanction may be		145,793	ithheld	ederal income tax with	4 I \$					
imposed on you in this income is taxable and the IRS determines that it has										
not been reported						FATCA filing requirement				
7 State income	7 \$	State/Payer's state no.	6	ate tax withheld	5 S		nt number (see instructions)	Account n		
	\$				\$ \$					

				☐ VOID ☐ CORRE	7272				
Coverdell FCA		OMB No. 1545-1815	1 Coverdell ESA contributions		TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code				
Coverdell ESA Contribution Information		2020	367,667 2 Rollover contributions	d = 378,739	Total of all forms filed				
		Form 5498-ESA	11,932						
Copy A For				BENEFICIARY'S TIN	TRUSTEE'S/ISSUER'S TIN				
Internal Revenue Service Center					BENEFICIARY'S name				
File with Form 1096.									
For Privacy Act and Paperwork Reduction				Street address (including apt. no.)					
Act Notice, see the 2020 General Instructions for				City or town, state or province, country, and ZIP or foreign postal code					
Certain Information Returns.					Account number (see instructions)				
- Internal Revenue Service	reasury -	Department of the T	ww.irs.gov/Form5498ESA	Cat. No. 34011J	Form 5498-ESA				

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page

7272	☐ VOID ☐ CORP	RECTED		
province, country, and ZIP or fo		1 Coverdell ESA contributions \$ 310,276		Coverdell ESA Contribution
Total of all individuals	represented = 320,307	2 Rollover contributions \$ 10,932		Information
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN			Copy A For
BENEFICIARY'S name	•			Internal Revenue Service Center
				File with Form 1096.
Street address (including apt. n	0.)			For Privacy Act and Paperwork Reduction
City or town, state or province,	country, and ZIP or foreign postal code			Act Notice, see the 2020 General Instructions for
Account number (see instructio	ns)			Certain Information Returns.
Form 5498-ESA	Cat. No. 34011J	www.irs.gov/Form5498ESA	Department of the T	reasury - Internal Revenue Service

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Form **5498-ESA**

Amount of selected lines filed (in thousands of dollars)

VOID CORRECTED 7272 TRUSTEE'S or ISSUER'S name, street address, city or town, state or 1 Coverdell ESA contributions OMB No. 1545-1815 province, country, and ZIP or foreign postal code **Coverdell ESA** 360,245 2020 Contribution 2 Rollover contributions Total of all forms filed = 378,739 Information 291,225 Form **5498-ESA** TRUSTEE'S/ISSUER'S TIN BENEFICIARY'S TIN Copy A For BENEFICIARY'S name **Internal Revenue Service Center** File with Form 1096. Street address (including apt. no.) For Privacy Act and Paperwork Reduction Act Notice, see the City or town, state or province, country, and ZIP or foreign postal code 2020 General Instructions for **Certain Information** Account number (see instructions)

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www.irs.gov/Form5498ESA

Cat. No. 34011J

Returns.

Number of Forms filed for selected line CORRECTED (if checked)

ZIP or foreign postal code,	tal of all forms filed = 4,141,244		eeds	OMB No. 1545-0997	Proceeds From Real Estate Transactions		
		\$	4,101,918	Form 1099-S			
FILER'S TIN	TRANSFEROR'S TIN	3 Address (inc	cluding city, state,	and ZIP code) or legal de	escription	Copy B	
						For Transferor	
TRANSFEROR'S name Street address (including a	1	received or will re	ces	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			
City or town, state or provin	nce, country, and ZIP or foreign postal code	alien, forei	5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust)				
Account number (see instru	6 Buyer's pa	6 Buyer's part of real estate tax \$ 1,327,42					
Form 1099-S	(keep for your records)	www.irs.gov/F	orm1099S	Department of the	Treasury -	- Internal Revenue Service	

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

		ILOTED (II C	nicerca)		_				
FILER'S name, street address, ZIP or foreign postal code, and	city or town, state or province, country, telephone number	1 Date of c	osing	OMB No. 1545-0997					
Total of all individuals researched = 2.777.070					Pro	ceeds From Real			
l otal of all individuals	tal of all individuals represented = 3,777,873		oceeds	20 20		ate Transactions			
		\$	3,747,217	Form 1099-S					
FILER'S TIN	TRANSFEROR'S TIN	3 Address (i	ncluding city, state,	scription	Сору В				
						For Transferor			
TRANSFEROR'S name	TRANSFEROR'S name			This is implication are					
Street address (including apt. r	no.)	4 Transfero as part of	furnished to the IRS. If you are required to file a return, a negligence						
City or town, state or province,	alien, for	d, transferor is a fo eign partnership,		penalty or other sanction may be imposed on you if this item is required to be reported and the IRS					
Account number (see instruction	6 Buyer's p	248,579	determines that it has						
Form 1099-S	(keep for your records)	www.irs.gov/	Form1099S	Department of the	Freasury -	Internal Revenue Service			

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

			(II CITOCITOA)						
FILER'S name, street address, of ZIP or foreign postal code, and	city or town, state or province, country, telephone number	1 Date	of closing	OMB No. 1545-0997					
Total of all forms filed = 4,141,244				2020		ceeds From Real			
Total of all forms med	- 4,141,244	2 Gros	s proceeds		Est	ate Transactions			
		\$	1,331,663,100	Form 1099-S					
FILER'S TIN	TRANSFEROR'S TIN	3 Addr	ess (including city, state,	scription	Copy B				
						For Transferor			
TRANSFEROR'S name			This is it						
						information and is being furnished to the IRS. If			
		4 Tran	sferor received or will re	ces	you are required to file a				
Street address (including apt. no	o.)	as part of the consideration (if checked) return, a ne							
			ecked, transferor is a fo		penalty or other sanction may be				
City or town, state or province,	country, and ZIP or foreign postal code	alien trust	, foreign partnership, i	ign ▶ □	imposed on you if this item is required to be reported and the IRS				
Account number (see instruction	Account number (see instructions)			6 Buyer's part of real estate tax					
		\$		1,	107,812	not been reported.			
Form 1099-S	(keep for your records)	www.irs	.gov/Form1099S	Department of the	Freasury -	Internal Revenue Service			

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 2,645,854,881			Applicable checkbox on Form	Proceeds From Broker and Barter Exchange Transactions			
			1a Description of property ((Example: 100 sh. XYZ Co.)			
			1b Date acquired	1c Date sold or disposed			
PAYER'S TIN	YER'S TIN RECIPIENT'S TIN		1d Proceeds \$ 2,530,484,590	1e Cost or other basis \$ 2,379,304,816	Copy B		
			1f Accrued market discount \$ 1,046,590	1g Wash sale loss disallowed \$ 767,502,064			
RECIPIENT'S name			2 Short-term gain or loss Long-term gain or loss Ordinary	3 If checked, proceeds from: Collectibles			
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code Account number (see instructions)			4 Federal income tax withheld \$ 379,960	5 If checked, noncovered security	This is important tax information and is being furnished to the IRS. If you are		
			6 Reported to IRS: Gross proceeds Net proceeds	7 If checked, loss is not allowed based on amount in 1d	required to file a return, a negligence penalty or other		
			8 Profit or (loss) realized in 2020 on closed contracts	9 Unrealized profit or (loss) on open contracts — 12/31/2019	sanction may be imposed on you i this income is		
CUSIP number		FATCA filing requirement	\$ 3,443,440 10 Unrealized profit or (loss) on open contracts—12/31/2020	11 Aggregate profit or (loss) on contracts	taxable and the IRS determines that it has not been		
14 State name	15 State identification	no. 16 State tax withheld	\$ 202,982	\$ 3,501,659	reported.		
		\$ \$	12 If checked, basis reported to IRS	13 Bartering \$ 18,343			
Form 1099-B	(Kee	ep for your records)	www.irs.gov/Form1099B	Department of the Treasury	- Internal Revenue Service		

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all individuals represented = 78,488,718			A	pplicable chec	kbox on Form	894	9 OMB No. 1545-07 20 20 Form 1099-E		Proceeds From Broker and Barter Exchange Transactions	
				1	a Description	of property	(Ex	ample: 100 sh. XYZ C	o.)	
				1	b Date acquire	ed	10	c Date sold or disposed		
PAYER'S TIN		RECIPIEN	T'S TIN	\$	d Proceeds	75,797,615	16	e Cost or other basis 69,382,2	224	Copy B For Recipient
				11 \$	f Accrued mar	rket discount 378,769	1 7	g Wash sale loss disallow 15,259,		
RECIPIENT'S name				2	Short-term ga Long-term ga Ordinary	_	3	If checked, proceeds from Collectibles	om:	This is important tax
Street address (including apt. no.)		\$	Federal incon	ne tax withheld 104,416		If checked, noncovered security]	information and is being furnished to the IRS. If you are		
City or town, state or province, country, and ZIP or foreign postal code Account number (see instructions)		6	Reported to I Gross proceed: Net proceed:	eds	7	If checked, loss is not allow based on amount in 1d	ved	required to file a return, a negligence penalty or other sanction may be imposed on you if this income is		
		8 \$	Profit or (loss 2020 on close			Unrealized profit or (loss) open contracts—12/31/2	019			
CUSIP number			FATCA filing requirement	÷	Unrealized pro	s-12/31/2020	11	Aggregate profit or (loss on contracts		taxable and the IRS determines that it has not been
14 State name	15 State identif	cation no.	State tax withheld	\$		129,026	_		779	reported.
		\$ \$		12	If checked, b to IRS	asis reported	13 \$	Bartering 7, 9	962	
Form 1099-B	•	(Keep fo	or your records)	•	www.irs.gov	/Form1099B		Department of the Treas	ury -	Internal Revenue Service

14 State name

Form **1099-B**

15 State identification no. 16 State tax withheld

(Keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

CORRECTED (if checked) OMB No. 1545-0715 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 **Proceeds From Broker and** 20**20 Barter Exchange** Total of all forms filed = 2.645,854,881 **Transactions** Form 1099-B 1a Description of property (Example: 100 sh. XYZ Co.) 1b Date acquired 1c Date sold or disposed PAYER'S TIN RECIPIENT'S TIN Copy B 1d Proceeds 1e Cost or other basis 16,914,212,000 16,224,949,000 \$ For Recipient 1g Wash sale loss disallowed 1f Accrued market discount 625,401 663,289,202 RECIPIENT'S name 2 Short-term gain or loss 3 If checked, proceeds from: Long-term gain or loss Collectibles This is important tax 4 Federal income tax withheld 5 If checked, noncovered Street address (including apt. no.) information and is 167,459 security being furnished to the IRS. If you are 6 Reported to IRS: 7 If checked, loss is not allowed required to file a based on amount in 1d City or town, state or province, country, and ZIP or foreign postal code Gross proceeds return, a negligence penalty or other Net proceeds sanction may be Profit or (loss) realized in 2020 on closed contracts 9 Unrealized profit or (loss) on open contracts—12/31/2019 imposed on you if Account number (see instructions) this income is -9,658,507 33,811 taxable and the IRS 10 Unrealized profit or (loss) on open contracts—12/31/2020 CUSIP number FATCA filing determines that it Aggregate profit or (loss) requirement on contracts has not been reported.

-203,748

13 Bartering

12 If checked, basis reported to IRS

www.irs.gov/Form1099B

-10,848,241

46,929

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 144,008		or T	OMB No. 1545-0877 2020 Form 1099-A	Ab	Acquisition or andonment of ured Property
		1 Date of lender's acquisition or	1 ' '		Сору В
LENDER'S TIN	BORROWER'S TIN	knowledge of abandonment	outstanding		For Borrower
			\$ 1	138,833	This is important tax
BORROWER'S name Street address (including apt. no.)		3	4 Fair market value of pro		furnished to the IRS. If you are required to file a
		5 If checked, the borrower was of the debt		payment	penalty or other sanction may be imposed on you if
City or town, state or province, country, and ZIP or foreign postal code		6 Description of property			taxable income results from this transaction and the IRS determines
Account number (see instructions)				that it has not been reported.	
Form 1099-A	(keep for your records)	www.irs.gov/Form1099A	Department of the T	reasury -	Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all individuals represented = 141,926			OMB No. 1545-0877 2020 Form 1099-A	Ab	Acquisition or andonment of cured Property	
		1 Date of lender's acquisition or	1 ' '		Copy B	
LENDER'S TIN	BORROWER'S TIN	knowledge of abandonment	outstanding		For Borrower	
			\$	136,758	This is important tax	
BORROWER'S name		3	4 Fair market value of property		information and is being furnished to the IRS. If	
			\$	131.762	you are required to file a return, a negligence	
Street address (including apt. no.)		5 If checked, the borrower was personally liable for repayment of the debt			nenalty or other	
City or town, state or province, country, and ZIP or foreign postal code		6 Description of property			taxable income results from this transaction and the IRS determines	
Account number (see instructions)]			that it has not been reported.	
Form 1099-A	(keep for your records)	www.irs.gov/Form1099A	Department of the T	reasury -	Internal Revenue Service	

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 144,008		r	OMB No. 1545-0877 2020 Form 1099-A	Ab	Acquisition or andonment of cured Property
		1 Date of lender's acquisition or	1 ' '		Copy B
LENDER'S TIN	BORROWER'S TIN	knowledge of abandonment	outstanding		For Borrower
			\$ 11,	556,988	This is important tax
BORROWER'S name		3	4 Fair market value of propert		furnished to the IRS. If
			\$ 12.5	261,318	you are required to file a return, a negligence
Street address (including a	pt. no.)	5 If checked, the borrower was personally liable for repayment of the debt			penalty or other sanction may be imposed on you if
City or town, state or province, country, and ZIP or foreign postal code		6 Description of property			taxable income results from this transaction and the IRS determines
Account number (see instru	uctions)				that it has not been reported.
Form 1099-A	(keep for your records)	www.irs.gov/Form1099A	Department of the T	reasury -	Internal Revenue Service

Form **1098**

(Keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line 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. Total of all forms filed = 87,807,687		*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 2020 Form 1098		Mortgage Interest Statement
		1 Mortgage interest received f	rom payer(s)/borrower(s)*	Copy B
		\$	87,2	201,314	For Payer/
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	2 Outstanding mortgage principal	3 Mortgage origination	n date	Borrower
		\$ 85,715,025			The information in boxes 1
		4 Refund of overpaid interest	5 Mortgage insurance premiums)	through 9 and 11 is important tax information and is being
PAYER'S/BORROWER'S name		\$ 100,707	1 '	75,096	furnished to the IRS. If you are required to file a return, a
		6 Points paid on purchase of p	principal residence		negligence penalty or other
		\$	2,61	4,025	sanction may be imposed on you if the IRS determines
Street address (including apt. no.)		7 If address of property se as PAYER'S/BORROWER'S at the address or description is e		that an underpayment of tax results because you overstated a deduction for this mortgage interest or for	
City or town, state or province, country, and ZIP or foreign postal code		8 Address or description of prinstructions)	operty securing mortgag	ge (see	these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or
9 Number of properties securing the mortgage	10 Other				because you claimed a nondeductible item.
Account number (see instructions)		_			11 Mortgage acquisition date

www.irs.gov/Form1098

Form **1098**

(Keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line 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. Total of all individuals represented = 61,170,149		*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.	2020		Mortgage Interest Statement
		1 Mortgage interest received	from payer(s)/borrower(s	s)*	Сору В
		\$	60,9	944,246	For Payer/
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	2 Outstanding mortgage principal	3 Mortgage origination	n date	Borrower
		\$ 60,577,686			The information in boxes 1
		4 Refund of overpaid interest	5 Mortgage insurance premiums)	through 9 and 11 is important tax information and is being furnished to the IRS. If you
PAYER'S/BORROWER'S name		\$ 100,531	\$ 14,11	18,230	are required to file a return, a
		6 Points paid on purchase of	principal residence		negligence penalty or other
		\$	19,306	sanction may be imposed or you if the IRS determines	
Street address (including apt. no.)		7 If address of property s as PAYER'S/BORROWER'S a the address or description is e		that an underpayment of tax results because you overstated a deduction for this mortgage interest or for	
City or town, state or province, country, and ZIP or foreign postal code		8 Address or description of prinstructions)	operty securing mortgag	ge (see	these points, reported ir boxes 1 and 6; or because you didn't report the refunc of interest (box 4); or
9 Number of properties securing the mortgage	10 Other				because you claimed a nondeductible item.
Account number (see instructions)					11 Mortgage acquisition date

www.irs.gov/Form1098

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) 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. Caution: The amount shown may OMB No. 1545-1380 not be fully deductible by you. Mortgage Limits based on the loan amount 2020 and the cost and value of the Interest secured property may apply. Also, you may only deduct interest to the Statement extent it was incurred by you, actually paid by you, and not Total of all forms filed = 87,807,687 reimbursed by another person. Form 1098 1 Mortgage interest received from payer(s)/borrower(s)* Copy B 480,013,960 For Payer/ RECIPIENT'S/LENDER'S TIN PAYER'S/BORROWER'S TIN 2 Outstanding mortgage 3 Mortgage origination date Borrower principal The information in boxes 1 \$ 16,906,155,000 nrough 9 and 11 is important 4 Refund of overpaid 5 Mortgage insurance tax information and is being interest premiums furnished to the IRS. If you PAYER'S/BORROWER'S name 92,457 22,787,708 \$ are required to file a return, a 6 Points paid on purchase of principal residence negligence penalty or other sanction may be imposed on 5,753,044 you if the IRS determines Street address (including apt. no.) If address of property securing mortgage is the same that an underpayment of tax as PAYER'S/BORROWER'S address, the box is checked, or results because you the address or description is entered in box 8. overstated a deduction for this mortgage interest or for City or town, state or province, country, and ZIP or foreign postal code 8 Address or description of property securing mortgage (see these points, reported in instructions) boxes 1 and 6; or because you didn't report the refund of interest (box 4); or 9 Number of properties securing the because you claimed a 10 Other nondeductible item. mortgage 11 Mortgage acquisition date Account number (see instructions)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number Total of all forms filed = 28,421,865			Payments rece qualified tuition expenses 2		OMB No. 1545-1574		Tuition Statement
				0	Form 1098-T		
FILER'S employer identification no. S	TUDENT'S TIN		3		•		Сору В
							For Student
STUDENT'S name			4 Adjustments n prior year	nade for a	5 Scholarships or grad	nts	This is important tax information
			\$	1,625,414	\$ 16,0	013,177	and is being
Street address (including apt. no.)			6 Adjustments to scholarships of for a prior year	r grants	7 Checked if the amount in box 1 includes amounts for an	unt	furnished to the IRS. This form must be used to complete Form 8863
City or town, state or province, country, and ZIP or foreign postal code			\$	474,215	academic period beginning January- March 2021		to claim education credits. Give it to the
Service Provider/Acct. No. (see instr.)	8 Check if at least		9 Checked if a g	raduate	10 Ins. contract reimb.	/refund	tax preparer or use it to prepare the tax return.
	half-time student		student		\$	2,071	F - F

(keep for your records)

www.irs.gov/Form1098T

Form **1098-T**

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED

FILER'S name, street address, city or to foreign postal code, and telephone num Total of all individuals repr		ceived for on and related 24,689,274	OMB No. 1545-1574		Tuition Statement		
			0	Form 1098-T			
FILER'S employer identification no.	STUDENT'S TIN	3		•	•	Сору В	
						For Student	
STUDENT'S name		4 Adjustments prior year	made for a	5 Scholarships or gra	nts	This is important tax information	
		\$	1,624,395	\$ 15,	519,199	and is being	
Street address (including apt. no.)	6 Adjustments scholarships for a prior ye	or grants	7 Checked if the amount in box 1 includes amounts for an	unt	furnished to the IRS. This form must be used to complete Form 8863		
City or town, state or province, country, and ZIP or foreign postal code		\$	474,215	academic period beginning January- March 2021		to claim education credits. Give it to the	
Service Provider/Acct. No. (see instr.)	8 Check if at least	9 Checked if a	graduate	10 Ins. contract reimb	./refund	tax preparer or use it to prepare the tax return.	
	half-time student	student		œ	2 071		

www.irs.gov/Form1098T

Form **1098-T**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number Total of all forms filed = 28,421,865			1 Payments recount qualified tuition expenses \$		OMB No. 1545-1574		Tuition Statement
				0	Form 1098-T		
FILER'S employer identification no.	STUDENT'S TIN		3				Сору В
							For Student
STUDENT'S name			4 Adjustments n	nade for a	5 Scholarships or grain	nts	-
			prior year				This is important tax information
			\$	2,073,584	\$ 128,0	12,579	and is being
Street address (including apt. no.)			6 Adjustments to scholarships of for a prior year	or grants	7 Checked if the amou in box 1 includes amounts for an	ınt	furnished to the IRS. This form must be used to
City or town, state or province, country, and ZIP or foreign postal code			\$	654,478	academic period beginning January– March 2021		complete Form 8863 to claim education credits. Give it to the
Service Provider/Acct. No. (see instr.)	8 Check if at least		9 Checked if a g	raduate	10 Ins. contract reimb.	/refund	tax preparer or use it to prepare the tax return.
	half-time student		student		\$	15,779	ppo tax rotarri

(keep for your records)

www.irs.gov/Form1098T

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line 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 Total of all forms filed = 20,040,607			OMB No. 1545-1576 20 20		Student Loan Interest Statement
			Form 1098-E		
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest receive	d by lender	•	Copy B
		\$	19,	,988,300	For Borrower
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code					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
Account number (see ins	tructions)	2 If checked, box 1 does not in fees and/or capitalized interesseptember 1, 2004		ore	overstated a deduction for student loan interest.
Form 1098-E	(keep for your records)	www.irs.gov/Form1098E	Department of the	Treasury -	Internal Revenue Service

www.irs.gov/Form1098E

Department of the Treasury - Internal Revenue Service

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line 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 Total of all individuals represented = 16,540,404			OMB No. 1545-1576 2020 Form 1098-E	Student Loan Interest Statement
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest receive		Copy B
		\$	16,505,5	'
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code			This is important tay information and is being furnished to the IRS. I you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that ar underpayment of tay results because you	
Account number (see instructions)		2 If checked, box 1 does not in fees and/or capitalized intere September 1, 2004	overstated a deduction for student loan interest	
Form 1098-E	(keep for your records)	www.irs.gov/Form1098E	Department of the Treasu	ıry - Internal Revenue Service

www.irs.gov/Form1098E

(keep for your records)

Form **1098-E**

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) 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			OMB No. 1545-1576		Student
Total of all forms filed = 20,040,607			2020		Loan Interest Statement
			Form 1098-E	İ	
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest recei	ved by lender	•	Сору В
		\$	25,	191,051	For Borrower
BORROWER'S name Street address (including apt. no.) City or town, state or province, cou	intry, and ZIP or foreign postal code				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
Account number (see instructions)		2 If checked, box 1 does not fees and/or capitalized into September 1 2004		re \Box	underpayment of tax results because you overstated a deduction for student loan interest.

www.irs.gov/Form1098E

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

CREDITOR'S name, street ZIP or foreign postal code	,	Date of identifiable event Amount of debt discharged	Cancellation	
		\$ 5,601,159 3 Interest, if included in box 2 \$ 406,019	1	of Debt
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description	Copy B For Debtor	
DEBTOR'S name				This is important tax information and is being furnished to the IRS. I'you are required to file a
Street address (including a	apt. no.) ince, country, and ZIP or foreign postal code	5 If checked, the debtor was prepayment of the debt .	personally liable for ▶ [return, a negligence penalty or other sanction may be imposed on you if taxable income results
Account number (see insti		6 Identifiable event code	7 Fair market value of proper \$ 138,8	from this transaction and the IRS determines that it has not been
Form 1099-C	(keep for your records)	www.irs.gov/Form1099C	Department of the Treasu	ury - Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

	OMB No. 1545-1424	1 Date of identifiable event	CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		
Cancellation		2 Amount of debt discharged			
of Debt	20 20	\$ 4,531,608	Total of all individuals represented = 4,544,314		
		3 Interest, if included in box 2			
	Form 1099-C	\$ 392,318			
Copy B For Debtor		4 Debt description	DEBTOR'S TIN	CREDITOR'S TIN	
This is important tax information and is being furnished to the IRS. If you are required to file a			DEBTOR'S name		
return, a negligence penalty or other sanction may be	ersonally liable for	5 If checked, the debtor was per repayment of the debt .	Street address (including apt. no.)		
imposed on you if taxable income results from this transaction			City or town, state or province, country, and ZIP or foreign postal code		
and the IRS determines that it has not been	7 Fair market value of property	6 Identifiable event code	Account number (see instructions)		
reported.	\$ 136,460				
y - Internal Revenue Service	Department of the Treasury -	www.irs.gov/Form1099C	p for your records)	Form 1099-C (kee	

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

CREDITOR'S name, stree ZIP or foreign postal cod	,	2 Amount of debt discharged 29,857,746 3 Interest, if included in box 2	OMB No. 1545-1424	Cancellation of Debt
		\$ 869,707	Form 1099-C	
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description	Copy B For Debtor	
DEBTOR'S name				This is important tax information and is being furnished to the IRS. If you are required to file a
Street address (including	apt. no.)	5 If checked, the debtor was p repayment of the debt .	ersonally liable for	return, a negligence penalty or other sanction may be
City or town, state or pro	vince, country, and ZIP or foreign postal code			imposed on you if taxable income results from this transaction
Account number (see instructions)		6 Identifiable event code	7 Fair market value of p	and the IRS determines that it has not been reported.
Form 1099-C	(keep for your records)	www.irs.gov/Form1099C	Department of the Tre	easury - Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 120,114,212		\$ 2 State or	yment compensation 47,676,444 local income tax credits, or offsets	OMB No. 1545-0120	Certai Governmer Payment		
		\$	70,042,197	Form 1099-G		_	
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 an	nount is for tax year	4 Federal income tax	withheld	Сору В	
				\$ 27,0	82,424	For Recipient	
RECIPIENT'S name		5 RTAA pa	ayments	6 Taxable grants		This is important tax	
		\$	*	\$ 3	350,472	information and is	
		7 Agricultu	ire payments	8 If checked, box 2 is		being furnished to the IRS. If you are required	
Street address (including a	ot. no.)	\$	941,751	trade or business income	▶ □	to file a return, a	
		9 Market o	gain			negligence penalty or other sanction may be	
City or town, state or province, country, and ZIP or foreign postal code		 \$	7,255			imposed on you if this	
		10a State	10b State identifica	ation no. 11 State income tax wit		income is taxable and the IRS determines that	
Account number (see instructions)				\$		it has not been	
			<u> </u>	\$		reported.	
Form 1099-G	(keep for your records)	www.irs.gov/F	orm1099G	Department of the T	reasury -	Internal Revenue Service	

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **1099-G**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

			niconca)			_	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			ment compensation	OMB N	lo. 1545-0120		
Total of all forms filed = 99,187,022			46,570,112 ocal income tax credits, or offsets	2(020		Certain Government Payments
		\$	65,845,607	Form	1099-G		_
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 amo	ount is for tax year	4 Fede	eral income ta	x withhe	d Copy B
				\$ 26,922,937		7 For Recipient	
RECIPIENT'S name		5 RTAA pay	ments	6 Taxable grants			This is important tax
		\$	*	\$		338,3	information and is
Street address (including apt. no.)		7 Agricultur	e payments 937,818		ecked, box 2 e or business me		being furnished to the IRS. If you are required to file a return, a
City or town, state or province, country, and ZIP or foreign postal code		9 Market gain \$ 7,255					negligence penalty or other sanction may be imposed on you if this
Account number (see instructions)		10a State	10b State identifica	ation no.	11 State income	tax withhe	income is taxable and the IRS determines that it has not been reported.
				- 13	ħ		· ·

www.irs.gov/Form1099G

Department of the Treasury - Internal Revenue Service

(keep for your records)

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 120,114,212		\$ 2 State or	583,385,813 local income tax credits, or offsets	2020		Certain Government Payments
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 am	77,835,617 nount is for tax year	Form 1099-G 4 Federal income tax	withheld	Сору В
	1.2012.11.0	0 20x 2 u	iouni io ioi tux you.	1	877,729	
RECIPIENT'S name	·	5 RTAA pa	•	6 Taxable grants	,	This is important tax
		\$	*	\$ 2,923,739		information and is
		7 Agricultu	re payments	8 If checked, box 2 is	3	being furnished to the IRS. If you are required
Street address (including	apt. no.)	\$	21,750,869 trade or b		▶ □	to file a return, a
		9 Market g	ain			negligence penalty or other sanction may be
City or town, state or province, country, and ZIP or foreign postal code		\$	19,605	5		imposed on you if this
		10a State	10b State identifica	identification no. 11 State income tax with		income is taxable and the IRS determines that
Account number (see instructions)				\$		it has not been
				\$		reported.
Form 1099-G	(keep for your records)	www.irs.gov/F	orm1099G	Department of the T	reasury -	Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

Form **1099-DIV**

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			1a	Total c	ordinary dividends	0	MB No. 1545-0110				
			\$	\$ 83,334,131 2020			1	Dividends and Distributions			
Total of all forms filed = 97,087,820			1b	Qualifi	ed dividends		2020				
			\$		81,038,8	01	orm 1099-DIV				
				Total c	capital gain distr. 31,503,7	1	Unrecap. Sec. 12	50 gain 580,563	Сору В		
PAYER'S TIN	RECIPIENT'S TIN		\$			-		•	For Recipient		
PAYER'S IIN	RECIPIENT'S TIN		20	Section	n 1202 gain	20	d Collectibles (28%) gain			
			\$		1,0	31 \$		11,490			
RECIPIENT'S name			3	Nondi	vidend distribution	-	Federal income tax		This is important tax		
			\$		12,918,1	80 \$	1,	612,195	information and is		
			5	Section	n 199A dividends	6			being furnished to the IRS. If you are		
Street address (including apt. no.)			\$		19,922,5	94 \$		253,096	required to file		
			7	Foreig	n tax paid	8	Foreign country or U.S.	possession	return, a negligence penalty or other		
City or town, state or province, cou	ntry, and ZIP or foreign posta	al code	\$		18,665,2	44			sanction may be imposed on you if		
			9	Cash li	quidation distributi	ns 1 0	Noncash liquidation of	distributions	this income is taxable and the IRS		
			\$		314,4	83 \$		37,724	determines that it has		
		FATCA filing requirement	11	Exemp	ot-interest dividen	ds 12	2 Specified private a bond interest dividence		not been reported.		
			\$		9,009,7	55 \$	6,	314,682			
Account number (see instructions)			13	State	14 State identification	no. 1 5	State tax withheld	I			
						\$					
			F		r	+			l		

www.irs.gov/Form1099DIV

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			a Total	ordinary dividends	ON	ИВ No. 1545-0110		
or foreign postar code, and telephor	ie 110.	\$;	50,815,892		2020	Dividends and Distributions	
		1	b Qualif	ied dividends	1			
Total of all forms filed = 53,533,339			;	48,498,452	F	orm 1099-DIV		
				capital gain distr.		Unrecap. Sec. 125	٠ ١	Сору В
	1	\$		22,448,605	Ψ	<u>·</u>	237,388	For Recipient
PAYER'S TIN	RECIPIENT'S TIN	2	c Section	on 1202 gain	2d	Collectibles (28%)	gain	•
		\$;	1,031	\$		11,490	
RECIPIENT'S name	•	3	Nondi	vidend distributions		Federal income tax		
		\$;	10,120,652	\$	1,4	412,202	This is important tax information and is
		5	Section	on 199A dividends	6			being furnished to
Street address (including apt. no.)		\$	5	15,311,240	\$		236,526	the IRS. If you are required to file a
		7	Foreig	gn tax paid	8	8 Foreign country or U.S. possession		return, a negligence penalty or other
		_ ٰ ٰ		44 505 422				sanction may be
City or town, state or province, cour	ntry, and ZIP or foreign postal code	\$		14,565,133	_			imposed on you if this income is taxable
		9		iquidation distributions 287,156		Noncash liquidation d	istributions 36.526	and the IRS determines that it has
	LEATON SU	\$		•	Ψ	0 10 1 1	,	not been reported.
	FATCA fili requireme	_	1 Exem	pt-interest dividends	12	Specified private a bond interest divid		
		\$;	7,324,767	\$	5,3	301,832	
Account number (see instructions)		1	3 State	14 State identification no.	15	State tax withheld		
					\$			
					\$			
Form 1099-DIV (k	eep for vour records)		www ir	s.gov/Form1099DIV		Department of the T	reasury -	Internal Revenue Service

Form **1099-DIV**

(keep for your records)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, Z or foreign postal code, and telephone no.			1a	Total	ordinary dividends	ON	MB No. 1545-0110		
			\$		287,362,785] ,	2020	l	Dividends and
				Qualifi	ied dividends				Distributions
Total of all forms filed	= 97,087,820		\$		224,470,077	F	orm 1099-DIV		
			2a \$	Total o	capital gain distr. 76,853,210		Unrecap. Sec. 12	50 gain 221,145	Copy B For Recipient
PAYER'S TIN	RECIPIENT'S TIN		2c	Sectio	n 1202 gain	2d	2d Collectibles (28%) gain		Tor recipient
			\$		380	\$		292	
RECIPIENT'S name		3	Nondi	vidend distributions		Federal income tax		This is important tax	
			\$		14,752,337	Ψ		347,297	information and is
Street address (including apt. no.)			5	Sectio	n 199A dividends	6	Investment expen	16,504	being furnished to the IRS. If you are
Street address (including apt. 110.)			7	Foroig	6,263,328	8	Foreign country or U.S.	•	required to file a return, a negligence
			7 Foreign tax paid		ľ	roreight country or 0.3.	possession	penalty or other	
City or town, state or province, count	y, and ZIP or foreign posta	ıl code	\$		2,603,014				sanction may be imposed on you if
			9	Cash li	quidation distributions	10 Noncash liquidation		distributions	this income is taxable and the IRS
			\$		6,431,947	\$!	987,336	determines that it has not been reported.
		FATCA filing requirement	11	Exemp	ot-interest dividends	12	Specified private a bond interest divide		not been reported.
			\$		23,702,048	\$	1,	895,639	
Account number (see instructions)	•		13	State	14 State identification no.	15	State tax withheld	l	
						\$			
			l			1 \$			

www.irs.gov/Form1099DIV

Department of the Treasury - Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or foreign postal code, and telephone	country, ZIP	Payer's RTN	(optional)	OM	IB No. 1545-0112		
Total of all forms filed = 164	,697,044		1 Interest inc	come		2020	Interest Income
			\$	139,997,265	Fo	rm 1099-INT	
			2 Early witho	Irawal penalty	Сору В		
PAYER'S TIN	RECIPIENT'S TIN		\$			932,478	
			<u> </u>	U.S. Savings Bor	nds and T	reas. obligations	For Recipient
					_	3,372,585	
RECIPIENT'S name			4 Federal inc	ome tax withheld		•	This is important tax
			\$	1,367,428	\$	101,641	information and is being furnished to the
Street address (including apt. no.)			6 Foreign tax	c paid 29,443	7 Foreign	country or U.S. possession	IRS. If you are required to file a
			8 Tax-exemp	ot interest	9 Specifinteres	ied private activity bond	return, a negligence penalty or other
City or town, state or province, countr	y, and ZIP or foreign pos	tal code	\$	5,297,212	\$	215,270	imposed on you ii
			10 Market dis	count	11 Bond	premium	this income is taxable and the IRS determines that it has
		FATCA filing	\$	16,910	\$	926,764	not been reported.
		requirement	12 Bond premium	on Treasury obligations	13 Bond p	premium on tax-exempt bond	1
			\$	220,997	\$	1,523,726	
Account number (see instructions)		-	14 Tax-exempt		15 State	16 State identification no.	17 State tax withheld
					ļ		Φ Φ
Form 1099-INT (keen	for your records)		iva era.//	1000INIT		t	Internal Davanus Camina

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, Z or foreign postal code, and telephone no.			Payer's RTN	(optional)	ON	1B No. 1545-0112	
Total of all individuals rep	presented = 84,730,251		1 Interest income		- 4	2020	Interest Income
			\$	79,048,883	Fo	rm 1099-INT	
			2 Early withd	rawal penalty			Сору В
PAYER'S TIN	RECIPIENT'S TIN		_ \$			763,407	
				U.S. Savings Bor	nds and T	reas. obligations	For Recipient
			\$			2,386,811	
RECIPIENT'S name			4 Federal inc	ome tax withheld		•	This is important tax
			\$	1,233,883	<u> </u>	96,355	information and is being furnished to the
Street address (including apt. no.)			6 Foreign tax	paid 26,729	-	n country or U.S. possession	IRS. If you are required to file a
			8 Tax-exempt interest 9 Specified private activity bond interest			return, a negligence penalty or other	
City or town, state or province, co	untry, and ZIP or foreign post	al code	\$	1,862,202	\$	187,913	i iliposed oli you ii
			10 Market disc	count	11 Bond	l premium	this income is taxable and the IRS
		FATCA filing] \$	16,800	\$	854,750	determines that it has not been reported.
		requirement	12 Bond premium	, ,		premium on tax-exempt bond	
			\$	207,330	\$	1,295,323	
Account number (see instructions)			14 Tax-exempt bond CUSIF		15 State	16 State identification no.	17 State tax withheld
							\$
Form 1099-INT (ke	eep for your records)		www.irs.gov/F	orm1099INT	Depa	rtment of the Treasury	- Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIF or foreign postal code, and telephone no.			Payer's RTN (optional)	0	MB No. 1545-0112	
Total of all forms filed = 164	,697,044		1 Interest income		2020	Interest Income
			\$ 73,575,3	324 _F	orm 1099-INT	
			2 Early withdrawal penalty	у		Сору В
PAYER'S TIN	RECIPIENT'S TIN		 \$		186,066	
			3 Interest on U.S. Savings	s Bonds and	Treas. obligations	- For Recipient
			 		9,663,662	
RECIPIENT'S name			4 Federal income tax with \$ 61,	held 5 Inve	stment expenses 207,101	This is important tax information and is
Street address (including apt. no.)			6 Foreign tax paid	7 Forei	gn country or U.S. possession	being furnished to the IRS. If you are required to file a return, a negligence penalty or other
			8 Tax-exempt interest	9 Specinter	ified private activity bond est	
City or town, state or province, coun	try, and ZIP or foreign pos	tal code	\$ 57,281,6	609 \$	739,465	iniposed on you ii
			10 Market discount	11 Bon	d premium	this income is taxable and the IRS
		FATCA filing	\$ 20,2	234 \$	835,172	determines that it has not been reported.
		requirement	12 Bond premium on Treasury obliga		premium on tax-exempt bond	1
			\$ 223,7	714 \$	20,513,964	ļ.
Account number (see instructions)			14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State identification no.	17 State tax withheld
						\$ \$
Form 1099-INT (kee	p for your records)		www.irs.gov/Form1099INT	Depa	artment of the Treasury	- Internal Revenue Service

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

9393	VOID CORRE			
PAYER'S name, street address, city of or foreign postal code, and telephone	or town, state or province, country, ZIP no.	Gross long-term care benefits paid	Long-Term Care and	
Total of all forms f	iled = 319,267	\$ 313,341	(Rev. October 2019)	Accelerated Death Benefits
		2 Accelerated death benefits paid	For calendar year 20	Denents
PAYER'S TIN	POLICYHOLDER'S TIN	\$ 5,926 3 Check one:	INSURED'S TIN	Copy A For
POLICYHOLDER'S name		Per Reimbursed amount		Internal Revenue Service Center
		INSURED'S name	File with Form 1096. For Privacy Act	
Street address (including apt. no.)		Street address (including apt.	and Paperwork Reduction Act Notice, see the	
City or town, state or province, count	ry, and ZIP or foreign postal code	City or town, state or province, co	ostal code current General Instructions for	
Account number (see instructions)	4 Qualified contract (optional)	(ontional):	Chronically ill Date cer	tified Certain Information Returns.
Form 1099-LTC (Rev. 10-2019)	Cat. No. 23021Z	www.irs.gov/Form1099LTC	Department of the T	reasury - Internal Revenue Service

9393	☐ VOID ☐ CORRE	CTED			
PAYER'S name, street address, city or foreign postal code, and telephone	or town, state or province, country, ZIP no.	Gross long-term care benefits paid	Long-Term Care and		
Total of all individuals repr	esented = 305,666	\$ 300,746	300,746 (Rev. October 2019) Ac		
		2 Accelerated death benefits paid	For calendar year 20	Benefits	
PAYER'S TIN	POLICYHOLDER'S TIN	\$ 5,926	INSURED'S TIN	Copy A	
POLICYHOLDER'S name		3 Check one: Per Reimbursed amount		For Internal Revenue Service Center	
		INSURED'S name	File with Form 1096.		
			For Privacy Act and Paperwork		
Street address (including apt. no.)		Street address (including apt.	Reduction Act Notice, see the		
City or town, state or province, count	ry, and ZIP or foreign postal code	City or town, state or province, co	Instructions for		
Account number (see instructions)	4 Qualified contract (optional)	(ontional):	Chronically ill Date cer	tified Certain Information Returns.	
Form 1099-LTC (Rev. 10-2019)	Cat No. 230217	www.irs.gov/Form1099LTC	Department of the T	reasury - Internal Revenue Service	

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) ONLY O

				<u> </u>															
PAYER'S name, street address, city or foreign postal code, and telephone	e, country, ZIP	1 Gross long-te benefits paid	rm care	OMB No. 1545-1519															
						Form 1099-LTC		g-Term Care and											
Total of all forms fi	Total of all forms filed = 319,267					ms filed = 319,267			filed = 319,267			ms filed = 319,267			\$	11,457,418	(Rev. October 2019)	A	ccelerated Death Benefits
				2 Accelerated di paid		For calendar year 20		Dononto											
PAYER'S TIN	POLICYHOL	DER'S TIN	N	\$	400,139	INSURED'S TIN		Copy A											
				3 Check one:	Reimbursed			For Internal Revenue											
POLICYHOLDER'S name				☐ diem ☐	amount			Service Center											
			INSURED'S nam		File with Form 1096.														
						For Privacy Act													
Street address (including apt. no.)				Street address (and Paperwork Reduction Act													
								Notice, see the											
City or town, state or province, country, and ZIP or foreign postal code			City or town, state																
								Instructions for Certain											
Account number (see instructions)			fied contract	5 Check, if appl	icable (Chronically ill Date cer	tified	Information											
		[(ор	otional)	(optional):		Terminally ill		Returns.											
Form 1099-LTC (Rev. 10-2019)	Ca	at. No. 230)21Z	www.irs.gov/Fo	rm1099LTC	Department of the T	reasury -	Internal Revenue Service											

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line

		CIED		עוטע	7474	
Distributions From an HSA Archer MSA, o dicare Advantage MSA	B No. 1545-1517 a 1099-SA . November 2019) or calendar year 20		TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number Total of all forms filed = 15,964,736			
Copy A	Earnings on excess cont.	1 Gross distribution \$ 15,915,588		CIPIENT'S TIN	RE	PAYER'S TIN
Internal Revenue Service Cente File with Form 1096 For Privacy Ac	FMV on date of death 8,834	3 Distribution code			3	RECIPIENT'S name
and Paperwor Reduction Ac Notice, see the		5 HSA	Street address (including apt. no.)			
current Genera Instructions fo Certai		MA MSA	City or town, state or province, country, and ZIP or foreign postal code			
Information Returns						Account number (see in
- Internal Revenue Servic	epartment of the Treasury -	rs.gov/Form1099SA	1D www.ir	Cat. No. 38471D	Rev. 11-2019)	Form 1099-SA (Rev

Form 1099-SA (Rev. 11-2019) Cat. No. 38471D www.irs.gov/Form1099SA Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

				VOID CORRE	9494			
Distribution From an HSA Archer MSA, o dicare Advantag MSA		OMB No. 1545-1517 Form 1099-SA (Rev. November 2019) For calendar year		TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number Total of all individuals represented = 14,786,770				
		20						
Copy /	16,569	2 Earnings on exces	1 Gross distribution \$ 14,744,983	RECIPIENT'S TIN	PAYER'S TIN			
Internal Revenu Service Cente File with Form 1096	eath	4 FMV on date of de	3 Distribution code	RECIPIENT'S name				
	8,834	\$						
and Paperwor Reduction Ad Notice, see th			5 HSA	Street address (including apt. no.)				
current Genera Instructions fo Certai			MA MSA	City or town, state or province, country, and ZIP or foreign postal code				
Informatio Returns				Account number (see instructions)				
- Internal Revenue Servic	Treasury -	Department of the 1	rs.gov/Form1099SA	Cat. No. 38471D www.ii	Form 1099-SA (Rev. 11-2019)			

Form 1099-SA (Rev. 11-2019) Cat. No. 38471D www.irs.gov/Form1099SA Department of the Treasury - Internal Revenue Service

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2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) 9494 CORRECTED

9494	☐ VOID ☐ CORRE		rtiiousuiius	or dollars)		
TRUSTEE'S/PAYER'S name, street additional country, ZIP or foreign postal code, and				OMB No. 1545-1517 Form 1099-S		Distributions From an HSA
Total of all forms filed			(Rev. November 2019 For calendar year	Med	Archer MSA, or dicare Advantage MSA	
PAYER'S TIN	RECIPIENT'S TIN	1 Gross dis	tribution 29,861,246	2 Earnings on exce	ess cont.	Copy A
RECIPIENT'S name		3 Distribution		4 FMV on date of c	leath 40,383	Internal Revenue Service Center File with Form 1096 For Privacy Ac
Street address (including apt. no.)	5 HSA Archer MSA			•	and Paperwork Reduction Act Notice, see the	
City or town, state or province, country, and ZIP or foreign postal code						current Genera Instructions for Certain
Account number (see instructions)						Information Returns

Form 1099-MISC

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

					,		_	
PAYER'S name, street address, city or foreign postal code, and telephone		e or province,	country, ZIP	1 Rents		OMB No. 1545-0115		
				\$	4,898,030	2020		Miscellaneous
				2 Royalties				Income
Total of all forms file	ed = 20,5	576,375		\$	4,762,175	Form 1099-MISC		_
				3 Other incom	ne	4 Federal income ta	Сору В	
				\$	7,465,332	\$	303,645	For Recipient
PAYER'S TIN	PAYER'S TIN RECIPIENT'S TIN			5 Fishing boat	proceeds	6 Medical and health ca	re payments	1
				\$	34,050	\$ 1,	245,003	
RECIPIENT'S name	•			7 Payer made direct sales of		8 Substitute paymen		
				\$5,000 or mo	ore of consumer	dividends or intere	st	This is important tax information and is
				(recipient) for resale		\$	310,820	being furnished to
Street address (including apt. no.)				9 Crop insuran	nce proceeds	10 Gross proceeds paid to an attorney		the IRS. If you are required to file a
				\$	196,264	\$	120,438	return, a negligence penalty or other
City or town, state or province, coun	try, and ZIP o	or foreign post	al code	11		12 Section 409A defe	errals	sanction may be
								imposed on you if this income is
						\$	9,270	
Account number (see instructions)		FATCA filing requirement		13 Excess gold payments	len parachute	14 Nonqualified defe compensation	rred	determines that it has not been
				\$	*	\$	26,626	reported.
				15 State tax wit	thheld	16 State/Payer's stat	e no.	17 State income
				\$				\$
				\$		T		\$

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

Form 1099-MISC

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

PAYER'S name, street address, city or foreign postal code, and telephone	,	or province, country, ZIP	1 Rents		OMB No. 1545-0115		
			\$	3,926,713	2020		Miscellaneous
Total of all individuals rep	resented =	15,328,187	2 Royalties				Income
			\$	3,110,844	Form 1099-MISC		
			3 Other income	Э	4 Federal income tax	withheld	Сору В
			\$	6,937,655	\$ 2	90,811	For Recipient
PAYER'S TIN RECIPIENT'S TIN		5 Fishing boat	proceeds	6 Medical and health care	payments		
			\$	29,981	 \$ 4	00,396	
RECIPIENT'S name			7 Payer made o		8 Substitute payments	s in lieu of	
				5,000 or more of consumer dividends or interest dividends to a buyer		This is important tax information and is	
			(recipient) for		\$	294,613	
Street address (including apt. no.)			9 Crop insurance proceeds		10 Gross proceeds pa attorney	the IRS. If you are required to file a	
			\$	188,019	\$	74,913	return, a negligence penalty or other
City or town, state or province, count	ry, and ZIP or	foreign postal code	11		12 Section 409A defer	rals	sanction may be imposed on you if
					 \$	9,270	this income is taxable and the IRS
Account number (see instructions)		FATCA filing requirement	13 Excess golde payments	en parachute	14 Nonqualified deferr compensation	ed	determines that it has not been
			\$	*	\$	26,598	reported.
			15 State tax with	hheld	16 State/Payer's state	no.	17 State income
			\$				\$
			\$		T		\$

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 20,576,375			110,140,222	OMB No. 1545-0115	I	Miscellaneous Income	
	\$ 3 Other inco	22,885,278	Form 1099-MISC				
				4 Federal income tax	000, -		
-		\$	43,538,619	,	01,128	For Recipient	
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing bo		6 Medical and health care	e payments		
		\$	603,938	,			
RECIPIENT'S name			le direct sales of more of consumer	8 Substitute payments dividends or interest	This is important tax		
				ts to a buyer nt) for resale \$ 203,855			
Street address (including apt. no.)		9 Crop insurance proceeds		10 Gross proceeds pa attorney	the IRS. If you are required to file a		
		\$	7,577,092	γ ,	204,664	return, a negligence penalty or other	
City or town, state or province, cour	ntry, and ZIP or foreign postal code	11		12 Section 409A deferrals		sanction may be imposed on you i	
				\$	24,533	i axable and the inc	
Account number (see instructions)	FATCA filing requirement	13 Excess go payments	lden parachute	14 Nonqualified deferr compensation	ed	determines that it has not been	
		\$	*	\$	539,162	reported.	
		15 State tax v	vithheld	16 State/Payer's state	no.	17 State income	
		\$				\$	
		\$				\$	
Form 1099-MISC (keep	for your records) www	v.irs.gov/Form1	099MISC	Department of the 1	reasury -	Internal Revenue Service	

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

^{*} Data not shown because of the small number of sample returns on which they are based.

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP			1 Patronage dividends OMB No. 1545-0118		45-0118			
or foreign postal code, and telephone no.		\$	1,071,547	202		Taxable		
Total of all forms filed = 1,299,735			nage distributions		20	Distributions		
			403	(Rev. Februa	ary 2020)	Received From		
Total of all forms fled = 1,233,733		3 Per-unit retain allocations			Cooperatives			
		\$	265,388	Form 1099	-PATR	· -		
PAYER'S TIN	RECIPIENT'S TIN	4 Federal in	come tax withheld	5 Redeemed	nonqualified notices	Copy B		
		\$	6,682	\$	96,457	For Recipient		
RECIPIENT'S name					7 Qualified payments (Section 199A(b)(7)) This is in inform			
		\$	238,524	\$	558,922	being furnished to the		
Street address (including apt. no.)		8 Section 19	99A(a) qual. items	9 Section 19	99A(a) SSTB items	IRS. If you are required to file a return, a		
		\$	595,164	\$ 3		negligence penalty or		
City or town, state or province, country, and ZIP or foreign postal code		10 Investment credit 11 Work opportunity c		ortunity credit	other sanction may be imposed on you if this			
			9,679	\$	325	income is taxable and		
Account number (see instructions)			12 Other credits and deductions 13 Specific			the IRS determines that it has not been		
		\$		83		reported.		
Form 1099-PATR (Rev. February 2020) (keep for your records) www.irs.gov/Form1099PATR Department of the Treasury - Internal Revenue Serv								

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of <u>individuals for selected line</u>

CORRECTED (if checked) OMB No. 1545-0118 PAYER'S name, street address, city or town, state or province, country, ZIP 1 Patronage dividends **Taxable** or foreign postal code, and telephone no. 890.127 2020 **Distributions** 2 Nonpatronage distributions Total of all individuals represented = 1,005,879 **Received From** (Rev. February 2020) Cooperatives 3 Per-unit retain allocations 225,911 Form 1099-PATR PAYER'S TIN RECIPIENT'S TIN 4 Federal income tax withheld 5 Redeemed nonqualified notices Copy B 6,471 93,107 For Recipient 6 Section 199A(g) deduction 7 Qualified payments RECIPIENT'S name This is important tax (Section 199A(b)(7)) information and is 208,243 445,913 being furnished to the \$ IRS. If you are required Street address (including apt. no.) 8 Section 199A(a) qual. items 9 Section 199A(a) SSTB items to file a return, a \$ 476,731 \$ negligence penalty or other sanction may be 10 Investment credit 11 Work opportunity credit City or town, state or province, country, and ZIP or foreign postal code imposed on you if this 283 8,923 income is taxable and the IRS determines that 12 Other credits and deductions 13 Specified Coop Account number (see instructions) it has not been 83 reported.

www.irs.gov/Form1099PATR

Department of the Treasury - Internal Revenue Service

Form 1099-PATR (Rev. February 2020)

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

			Checkeu)				
PAYER'S name, street address, city or town, state or province, country, ZIP			age dividends	OMB No. 15	45-0118		
or foreign postal code, and telephone no.		\$	\$ 1,840,347		20	Taxable	
Total of all forms filed = 1,299,735			tronage distributions	202		Distributions	
			1,043	(Rev. Februa	ary 2020)	Received From	
		3 Per-unit retain allocations			Cooperatives		
		\$	31,378,648	Form 1099	-PATR	•	
PAYER'S TIN RECIPIENT'S TIN		4 Federa	l income tax withheld	5 Redeemed	nonqualified notices	Copy B	
		\$	1,432	\$	134,235	For Recipient	
RECIPIENT'S name		6 Section 199A(g) deduction		7 Qualified payments (Section 199A(b)(7))		This is important tax information and is	
			1,184,572	\$	29,156,397	being furnished to the	
Street address (including apt.	no.)	8 Section	ction 199A(a) qual. items 9 Section 199A(a) SSTE			s IRS. If you are required to file a return, a	
		\$	23,365,026	\$	1,053	negligence penalty or	
City or town, state or province, country, and ZIP or foreign postal code		10 Investr	10 Investment credit		ortunity credit	other sanction may be imposed on you if this	
		\$	648,429	\$	20,224	income is taxable and	
Account number (see instructions)		12 Other o	12 Other credits and deductions		13 Specified Coop	the IRS determines that it has not been	
		 \$		241		reported.	

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Department of the Treasury - Internal Revenue Service

Form **1099-R**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of Forms filed for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. Total of all forms filed = 106,161,104		\$	Taxable amoun	719,262	<i>G</i>			Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
			2b	Taxable amount not determined		Total distribution		Copy B	
PAYER'S TIN	RECIPIENT'S TIN		3	Capital gain (ind in box 2a)			Federal inco withheld		Report this income on your federal tax return. If this
RECIPIENT'S name		5	Employee contri Designated Roth contributions or insurance premi	ו	6	Net unrealiz appreciation employer's	n in	federal income tax withheld in box 4, attach	
Street address (including apt. no.)		7	Distribution code(s)	IRA/ SEP/ SIMPLE		Other 725,504	31,892 %	this copy to your return. This information is	
City or town, state or province, country, and ZIP or foreign postal code		9a	Your percentage distribution	of total	1.	Total employee	contributions 2,988,598	being furnished to the IRS.	
10 Amount allocable to IRR within 5 years 2,264	1 1st year of desig. Roth contrib.	12 FATCA filing requirement	14 \$ \$	State tax withhel	ld	15	State/Payer	's state no.	16 State distribution \$
Account number (see instructions) 13 Date of payment		17 \$ \$	Local tax withhe	ld	18	Name of loc	ality	19 Local distribution \$	

Department of the Treasury - Internal Revenue Service

www.irs.gov/Form1099R

Form **1099-R**

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. Total of all individuals represented = 65,403,410			\$	Gross distribution 65,204,06 Taxable amount 56,990,28	3	20 20	Pr	Distributions From ensions, Annuities, Retirement or ofit-Sharing Plans, IRAs, Insurance Contracts, etc.
PAYER'S TIN RECIPIENT'S TIN			Taxable amount not determined Capital gain (included in box 2a)		Total distribution Federal inco withheld	me tax	Copy E Report this income on you federal tax return, If this	
RECIPIENT'S name			\$	Employee contribution Designated Roth contributions or insurance premiums	s/ \$	6 Net unrealiz appreciation employer's	n in	
Street address (including apt. no		eign postal code		code(s) SEP/ SIMP	.E \$	Other 692,956 b Total employee	% e contributions 2,976,810	This information is being furnished to the IRS.
10 Amount allocable to IRR within 5 years 2,262	1 1st year of desig. Roth contrib.	12 FATCA filing requirement	14 \$ \$	State tax withheld	1:	5 State/Payer	's state no.	16 State distribution \$
Account number (see instructions)		13 Date of payment	17 \$ \$	Local tax withheld	1:	8 Name of loc	cality	19 Local distribution \$

Department of the Treasury - Internal Revenue Service

www.irs.gov/Form1099R

Form 1099-R

2020 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars) CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. Total of all forms filed = 106,161,104			\$	Taxable amount	61,800	i L	MB No. 1545-0 2020 Form 1099-	Pr	Distributions From ensions, Annuities, Retirement or ofit-Sharing Plans, IRAs, Insurance Contracts, etc.
			2b	 Taxable amount not determined 	t		Total distribution		Сору В
PAYER'S TIN RECIPIENT'S TIN		3	Capital gain (inc in box 2a)			Federal inco withheld	me tax	Report this income on your federal tax return. If this	
			\$		60,582	•		140,130,579	form shows
RECIPIENT'S name		5	5 Employee contril Designated Roth contributions or insurance premit	ı	6	Net unrealiz appreciation employer's	n in	federal incom tax withheld i box 4, attac	
			\$	·		\$		3,605,555	this copy to your return.
Street address (including apt. no.)		7	Distribution code(s)	IRA/ SEP/ SIMPLE	8	Other 2,657,225	%	This information is being furnished to	
City or town, state or province, country, and ZIP or foreign postal code		9a	Your percentage distribution	of total %	١.	Total employee	contributions	the IRS.	
within 5 years	1 1st year of desig. Roth contrib.	12 FATCA filing requirement	14 \$	State tax withhel	d	15	State/Payer	's state no.	16 State distribution \$
\$ 24,327			\$						\$
Account number (see instructions) 13 Date of payment		17 \$	Local tax withhel	d	18	Name of loc	cality	19 Local distribution \$	
			\$						\$

Department of the Treasury - Internal Revenue Service

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