Revenue Procedure 2000-28

Reprinted from IR Bulletin 2000-27 Dated July 3, 2000

Rules and Specifications for Private Printing of Substitute Forms 1096, 1098, 1099, 5498, and W-2G



Department of the Treasury Internal Revenue Service Publication 1179 (Rev. 07-2000)

Catalog Number 47022Q

www.irs.ustreas.gov

26 CFR 601.602: Forms and instructions. (Also Part 1, Sections 220, 408, 408A, 6041, 6041A, 6042, 6043, 6044, 6045, 6047, 6049, 6050A, 6050B, 6050D, 6050E, 6050H, 6050J, 6050N, 6050P, 6050Q, 6050R, 6050S, 1.408-5, 1.408-7, 1.408A-7, 1.6041-1, 7.6041-1, 1.6042-2, 1.6042-4, 1.6044-2, 1.6044-5, 1.6045-1, 5f.6045-1, 1.6045-2, 1.6045-4, 1.6047-1, 1.6049-4, 1.6049-6, 1.6049-7, 1.6050A-1, 1.6050B-1, 1.6050D-1, 1.6050E-1, 1.6050H-1, 1.6050H-2, 1.6050J-1T, 1.6050N-1, 1.6050P-1).

Rev. Proc. 2000-28

TABLE OF CONTENTS

PART 1 - GENERAL INFORMATION	
Section 1.1 - Overview of Revenue Procedure 2000-28 Section 1.2 - General Requirements for Acceptable Substitute Forms 1096, 1098, 10 5498, and W-2G	99,
Section 1.3 - Definitions	
PART 2 - SPECIFICATIONS FOR SUBSTITUTE FORMS 1096 AND COPII	ES A
OF FORMS 1098, 1099, AND 5498 (ALL FILED WITH THE IRS) Section 2.1 - Specifications	9
Section 2.2 - Instructions for Preparing Paper Forms That Will Be Filed With the IRS	
PART 3 - SPECIFICATIONS FOR SUBSTITUTE FORM W-2G (FILED WIT THE IRS)	ГН
Section 3.1 - General Section 3.2 - Specifications for Copy A of Form W-2G	
PART 4 - SUBSTITUTE STATEMENTS TO FORM RECIPIENTS AND FOI RECIPIENT COPIES	RM
Section 4.1 - Specifications.	
Section 4.2 - Composite Statements	25
PART 5 - ADDITIONAL INSTRUCTIONS FOR SUBSTITUTE FORMS 109 1099, 5498, AND W-2G	8,
Section 5.1 - OMB Requirements	
Section 5.2 - Reproducible Copies	
PART 6 - EXHIBITS	
Section 6.1 - Exhibits of Forms in the Revenue Procedure	32

Part 1 General Information

Section 1.1 - Overview of Revenue Procedure 2000-28

1.1.1 Purpose The purpose of this revenue procedure is to set forth the requirements for the year 2000 for:

- Using official Internal Revenue Service (IRS) forms to file information returns with the IRS,
- Preparing acceptable substitutes of the official IRS forms to file information returns with the IRS, and
- Using official or acceptable substitute forms to furnish information to recipients.

1.1.2 Which	rocedure contains specifications for these information returns:	
Forms Are Covered?	Form	Title
covercu.	1096	Annual Summary and Transmittal of U.S. Information Returns
	1098	Mortgage Interest Statement
	1098-E	Student Loan Interest Statement
	1098-T	Tuition Payments Statement
	1099-A	Acquisition or Abandonment of Secured Property
	1099-B	Proceeds From Broker and Barter Exchange Transactions
	1099-C	Cancellation of Debt
	1099-DIV	Dividends and Distributions
	1099-G	Certain Government and Qualified State Tuition Program Payments
	1099-INT	Interest Income
	1099-LTC	Long-Term Care and Accelerated Death Benefits
	1099-MISC	Miscellaneous Income
	1099-MSA	Distributions From an MSA or Medicare+Choice MSA
	1099-OID	Original Issue Discount

3

1099-PATR	Taxable Distributions Received From Cooperatives	
1099-R	Distributions From Pensions, Annuities, Retirement or Profit- Sharing Plans, IRAs, Insurance Contracts, etc.	
1099-S	Proceeds From Real Estate Transactions	
5498	IRA Contribution Information	
5498-MSA	MSA or Medicare+Choice MSA Information	
W-2G	Certain Gambling Winnings	

1.1.3 Scope For purposes of this revenue procedure, a substitute form or statement is one that is not printed by the IRS. For a substitute form or statement to be acceptable to the IRS, it must conform to the official form or the specifications outlined in this revenue procedure. **Do not submit any substitute forms or statements listed above to the IRS for approval.** Privately printed forms may not state "This is an IRS approved form."

Filers making payments to certain recipients during a calendar year are required by the Internal Revenue Code (the Code) to file information returns with the IRS for these payments. These filers must also provide this information to their recipients. In some cases, this also applies to payments received. See **Part 4** for specifications that apply to recipient statements (generally Copy B).

In general, section 6011 of the Code contains requirements for filers of information returns. A filer must file information returns on magnetic media, through electronic filing, or on paper. A filer who is required to file 250 or more information returns of any one type during a calendar year must file those returns by magnetic media or electronic filing.

Exception. Filers are not required to use magnetic media or electronic filing when filing 250 or more Forms **1098-E** or **1098-T**.

Although not required, small volume filers (fewer than 250 returns during a calendar year) and Form 1098-E and 1098-T filers may file the forms on magnetic media or electronically. See the legal requirements for filing information returns (and providing a copy to a payee) in the **2000 General Instructions for Forms 1099, 1098, 5498, and W-2G.** In addition, see **Pub. 1220,** Specifications for Filing Forms 1098, 1099, 5498, and W-2G Magnetically or Electronically.

1.1.4 For More Information	 The IRS prints and provides the forms on which various payments must be reported. Alternatively, filers may prepare substitute copies of these IRS forms and use such forms to report payments to the IRS. For copies of the official forms and the instruction booklet for the reporting year, call our toll-free number at 1-800-TAX-FORM (1-800-829-3676). The IRS operates a central call site in Martinsburg, WV, to answer questions related to information returns, penalties, and backup withholding. Call
	withholding. Call 304-263-8700 Monday through Friday 8:30 a.m. to 4:30 p.m. eastern time. The TTY/TDD number is 304-267-3367.

1.1.5 Changes	The following changes have been made to this year's Revenue Procedure:		
to the	• A new Part 4, made up of sections from other Parts, has been added to		
Revenue	better address recipient statements. (Old Part 4 is now Part 5.)		
Procedure	• We have rearranged certain sections in the document for easier		
	understanding. For instance, Section 1.4 of last year's Revenue		
	Procedure is now Section 2.2.		
	• We are now providing general and specific form instructions as separate		
	products for 2000. The 2000 General Instructions for Forms 1099,		
	1098, 5498, and W-2G contain general information for all forms.		
	Separate specific instructions provide information for specific 2000		
	forms. These new products are referred to on the faces and in the notes		
	on the backs of the forms.		
	• We slightly revised Section 5.1 (OMB Requirements).		
	• The form dimensions shown on the exhibits have been slightly revised to reflect the actual dimensions of official IRS forms.		

Section 1.2 - General Requirements for Acceptable Substitute Forms 1096, 1098, 1099, 5498, and W-2G

1.2.1 Paper substitutes for Form 1096 and Copy A of Forms 1098, 1099, 5498, and
 Introduction W-2G that totally conform to the specifications listed in this revenue procedure may be privately printed and filed as returns with the IRS. The reference to the Department of the Treasury - Internal Revenue Service should be included on all such forms. If you are uncertain of any specification and want it clarified, you may submit a letter citing the specification, stating your understanding and interpretation of the specification, and enclosing an example of the form (if appropriate) to:

Internal Revenue Service Attn: Substitute Forms Program OP:FS:FP:F:CD 1111 Constitution Ave., NW Room 5244 IR Washington, DC 20224

Note: Allow at least 45 days for the IRS to respond.

Forms 1096, 1098, 1099, 5498, and W-2G are subject to annual review and possible change. Therefore, filers are cautioned against overstocking supplies of privately printed substitutes. The specifications contained in this revenue procedure apply to 2000 forms only.

1.2.2 Copy A Proposed substitutes for Copy A that do not conform to the specifications in this revenue procedure are not acceptable. Further, if you file such forms with the IRS, you may be subject to a penalty for failure to file an information return under section 6721 of the Code. Generally, the penalty is \$50 for each failure to file a form (up to \$250,000) that the IRS cannot accept as a return because it does not meet the provisions in this revenue procedure. No IRS office is authorized to allow deviations from this revenue procedure.

1.2.3 Copy B Copies B and Copies C of the following forms must contain the information in Section 1.5 to be considered a "statement" or "official form" under the applicable provisions of the Code. The format of this information is at the discretion of the filer with the exception of the location of the tax year, form number, form name, and the information for composite Form 1099 statements as outlined under Section 4.2.

Copy B of the following forms are:

Form	Recipient
1098	For Payer/Borrower
1098-E; 1099-A	For Borrower
1098-T	For Student
1099-С	For Debtor
1099-LTC	For Policyholder
1099-R; W-2G	(These forms may require Copy B to be attached to the Federal income tax return.)
1099-S	For Transferor
All other Forms 1099	For Recipient
5498; 5498-MSA	For Participant

Copy C of the following forms are:

Form	Recipient
1099-LTC	For Insured
1099-R	For Recipient's Records
W-2G	For Winner's Records

Note: On Copy C, Form 1099-LTC, you may reverse the locations of the policyholder's and the insured's name, street address, city, state, and ZIP code for easier mailing.

Section 1.3 - Definitions

1.3.1 Form Recipient	Form recipient means the person to whom you are required by law to furnish a copy of the official form or information statement. The form recipient may be referred to by different names on various Forms 1099 and related forms ("payer/borrower," "borrower," "student," "debtor," "policyholder," "insured," "transferor," "payment recipient," "participant," or, in the case of Form W-2G, the "winner"). See Section 1.2.3 earlier.
1.3.2 Filer	Filer means the person or organization required by law to file a form listed in Section 1.1.2 with the IRS. As outlined earlier, a filer may be a payer, creditor, recipient of mortgage or student loan interest payments, educational institution, broker, barter exchange, person reporting real estate transactions, trustee or issuer of any individual retirement arrangement or medical savings account, or lender who acquires an interest in secured property or who has reason to know that the property has been abandoned.
1.3.3 Substitute Form	Substitute form means a paper substitute of Copy A of an official form listed in Section 1.1.2 that totally conforms to the provisions in this revenue procedure.
1.3.4 Substitute Form Recipient Statement	Substitute form recipient statement means a paper statement of the information reported on a form listed in Section 1.1.2. This statement must be furnished to a person (form recipient), as defined under the applicable provisions of the Code and the applicable regulations.
1.3.5 Composite Substitute Statement	Composite substitute statement means one in which two or more required statements (e.g., Forms 1099-INT and 1099-DIV) are furnished to the recipient on one document. However, each statement must be designated separately and must contain all the requisite Form 1099 information except as provided under Section 4.2. A composite statement may not be filed with the IRS.

Part 2 Specifications for Substitute Forms 1096 and Copies A of Forms 1098, 1099, and 5498 (All Filed With the IRS)

Section 2.1 - Specifications

2.1.1 General Requirements	Form identifying numbers (e.g., 9191 for Form 1099-DIV) must be printed in nonreflective black carbon-based ink in print positions 15 through 19 using an OCR A font. The checkboxes to the right of the form identifying numbers must be 10-point boxes. The "VOID" checkbox is in print position 25. The "CORRECTED" checkbox is in position 33. Measurements are from the left edge of the paper, not including the perforated strip. See Exhibits D and K.			
	The substitute form must be an exact replica of the official IRS form with respect to layout and content. To determine the correct form measurements, see Exhibits A through T at the end of this publication.			
	Hot wax and cold carbon spots are not permitted on any of the internal form plies. These spots are permitted on the back of a mailer top envelope ply.			
	Use of chemical transfer paper for Copy A is acceptable.			
	The Government Printing Office (GPO) symbol must be deleted.			
2.1.2 Color and Paper Quality	Color and paper quality for Copy A (cut sheets and continuous pinfeed forms) as specified by JCP Code 0-25, dated November 29, 1978, must be white 100% bleached chemical wood, optical character recognition (OCR) bond produced in accordance with the following specifications.			
	Note: Reclaimed fiber in any percentage is permitted provided the requirements of this standard are met.			
	• Acidity: Ph value, average, not less than 4.5			
	• Basis Weight: 17 x 22-500 cut sheets			
	• Stiffness: Average, each direction, not less than—milligrams 50			

	• Tearing strength: Average, each direction, not less than—grams 40	
	• Opacity: Average, not less than—percent	
	• Thickness: Average—inch	
	• Porosity: Average, not less than—seconds	
	• Finish (smoothness): Average, each side—seconds	
	• Dirt: Average, each side, not to exceed—parts per million 8	
2.1.3 Chemical Transfer Paper	 Chemical transfer paper is permitted for Copy A only if the following standards are met: Only chemically backed paper is acceptable for Copy A. Front and back chemically treated paper cannot be processed properly by machine. Carbon-coated forms are not permitted. Chemically transferred images must be black. All copies must be clearly legible. Hot wax and cold carbon spots are not permitted for Copy A. Interleaved carbon should be black and must be of good quality to assure legibility on all copies and to avoid smudging. Fading must be minimized to assure legibility.	
2.1.4 Printing	All print on Copy A of Forms 1098, 1099, 5498, and the print on Form 1096 above the statement " <i>Please return this entire page to the Internal Revenue Service. Photocopies are NOT acceptable.</i> " must be in Flint J-6983 red OCR dropout ink or an exact match. However, the four-digit form identifying number must be in nonreflective carbon-based black ink in OCR A font.	
	The shaded areas of any substitute form should generally correspond to the format of the official form.	
	The printing for the Form 1096 statement and the following text may be in any shade or tone of black ink. Black ink should only appear on the lower part of the reverse side of Form 1096 where it will not bleed through and interfere with scanning.	

Note: The instructions on the front and back of **Form 1096**, which include filing addresses, must be printed.

Separation between fields must be 0.1 inch.

Except for Form 1099-R, the numbered captions are printed as solid with no shaded background.

Other printing requirements are discussed below.

2.1.5 OCR The contractor must initiate or have a quality control program to assure OCR ink density. Readings will be made when printed on approved 20 lb. white OCR bond with a reflectance of not less than 80%. Black ink must not have a reflectance greater than 15%. These readings are based on requirements of the "Scan-Optics Series 9000" Optical Scanner using Flint J-6983 red OCR dropout ink or an exact match.

The following testers and ranges are acceptable:

- **MacBeth PCM-II.** The tested Print Contrast Signal (PCS) values when using the MacBeth PCM-II tester on the "C" scale must range from .01 minimum to .06 maximum.
- **Kidder 082A.** The tested PCS values when using the Kidder 082A tester on the Infra Red (IR) scale must range from .12 minimum to .21 maximum. White calibration disc must be 100%. Sensitivity must be set at one (1).
- Alternative testers. Alternative testers must be approved by the Government so that tested PCS values can be established. You may obtain approval by writing to the following address:

Commissioner of Internal Revenue Attn: OP:FS:M:T:M, Room 1225 Tax Products 1111 Constitution Avenue, NW Washington, DC 20224

Type must be substantially identical in size and shape to the official form. y rules are either ¹ / ₂ -point or ³ / ₄ -point. Rules must be identical to that on the official IRS form.		
Note: The form identifying number must be nonreflective carbon-based black ink in OCR A font.		
Three Forms 1098, 1099, or 5498 (Copy A) are contained on a single page, 8 inches wide (without any snap-stubs and/or pinfeed holes) by 11 inches deep.		
Exception. Form 1099-R contains two documents per page.		
There is a .33 inch top margin from the top of the corrected box, and a .25 inch right margin. There is a $1/32''$ (0.0313'') tolerance for the right margin. If the right and top margins are properly aligned, the left margin for all forms will be correct. All margins must be free of print. See Exhibits A through T in this publication for the correct form measurements.		
These measurements are constant for all Forms 1098, 1099, and 5498. These measurements are shown only once in this publication, on Form 1098 (Exhibit B). Exceptions to these measurements are shown on the rest of the exhibits.		
The depth of the individual trim size of each form on a page must be $3^{2}/_{3}$ inches, the same depth as the official form.		
Exception. The depth of Form 1099-R is 5 ¹ / ₂ inches.		
Copy A (three per page; two per page for Form 1099-R) of privately printed continuous substitute forms must be perforated at each 11" page depth. No perforations are allowed between the $3^2/3$ " forms ($5^{1}/_2$ " for Form 1099-R) on a single copy page of Copy A.		
The words "Do NOT Cut or Separate Forms on This Page" must be printed in red dropout ink (as required by form specifications) between the three forms (two for Form 1099-R).		
Note: Perforations are required between all the other individual copies (Copies B and C, and Copies 1 and 2 for Forms 1099-R and 1099- <i>MISC</i> , and Copy D for Forms 1099-LTC and 1099-R) in the set.		

2.1.9 What You must include the OMB Number on Copies A and Form 1096 in the same location as on the official form.

The words "For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General Instructions for Forms 1099, 1098, 5498, and W-2G" *must* be printed on Copy A; "For more information and the Privacy Act and Paperwork Reduction Act Notice, see the 2000 General Instructions for Forms 1099, 1098, 5498, and W-2G" must be printed on Form 1096.

A postal indicia may be used if it meets the following criteria:

- It is printed in the OCR ink color prescribed for the form, and
- No part of the indicia is within one print position of the scannable area.

Printer's symbol — The GPO symbol must not be printed on substitute Copy A. Instead, the employer identification number (EIN) of the forms printer must be entered in the bottom margin on the face of each individual form of **Copy A**, or the bottom margin on the reverse side of each **Form 1096**.

The Catalog Number (Cat. No.) shown on the 2000 forms is used for IRS distribution purposes and need not be printed on any substitute forms.

The form **must not** contain the statement "IRS approved" or any similar statement.

2.2.1 The form recipient's name, street address, city, state, and ZIP code information should be typed or machine printed in black ink in the same format as shown on the official IRS form. The city, state, and ZIP code must be on the same line.

The following rules apply to the form recipient's name(s):

- The name of the appropriate form recipient must be shown on the first or second name line in the area provided for the form recipient's name.
- No descriptive information or other name may precede the form recipient's name.
- Only **one** form recipient's name may appear on the first name line of the form.
- If the multiple recipients' names are required on the form, enter on the first name line the recipient name that corresponds to the recipient taxpayer identification number (TIN) shown on the form. Place the other form recipients' names on the second name line (only 2 name lines are allowable).

Because certain states require that trust accounts be provided in a different format, generally filers should provide information returns reflecting payments to trust accounts with the:

- Trust's employer identification number (EIN) in the recipient's TIN area,
- Trust's name on the recipient's first name line, and
- Name of the trustee on the recipient's second name line.

Although handwritten forms will be accepted, the IRS prefers that filers **type or machine print** data entries. Also, filers should insert data in the **middle of blocks** well separated from other printing and guidelines, and take measures to guarantee clear, dark black, sharp images. Carbon copies and photocopies are not acceptable.

2.2.2 Account You should use the account number box for an account number designation.Number Box This number must not appear anywhere else on the form, and this box may not be used for any other item.

Showing the account number is optional. However, it may be to your benefit to include the recipient's account number or designation on paper documents if your recordkeeping system uses, for identification purposes, the account number or designation in conjunction with, or instead of, the name, social

security number, or employer identification number.

If you furnish the account number, the IRS will include it in future notices to you about backup withholding. If you use window envelopes and a reduced rate to mail statements to recipients, be sure the account number does not appear in the window. Otherwise, they may not be acceptable for mailing. Machine-printed forms should be printed using a 6 lines/inch option, and should

be printed in 10 pitch pica (10 print positions per inch) or 12 pitch elite (12 print **Specifications** positions per inch). Proportional spaced fonts are unacceptable.

and Restrictions

2.2.3

Substitute forms prepared in continuous or strip form must be burst and stripped to conform to the size specified for a single sheet before they are filed with the IRS. The size specified **does not include pinfeed holes**. Pinfeed holes must not be present on forms filed with the IRS.

DO NOT:

- Use a felt tip marker. The machine used to "read" paper forms generally cannot read this ink type.
- Use dollar signs (\$), ampersands (&), asterisks (*), commas (,), or other special characters in the numbered money boxes. Exception. Use decimal points to indicate dollars and cents (e.g., 2000.00 is acceptable).
- Fold Forms 1096, 1098, 1099, or 5498 mailed to the IRS. Mail these • forms flat in an appropriately sized envelope or box. Folded documents cannot be readily moved through the machine used in IRS processing.
- Staple Forms 1096 to the transmitted returns. Any staple holes near the • return code number may impair the IRS's ability to machine scan the type of documents.
- Type other information on **Copy A**.
- Cut or separate the individual forms on the sheet of forms of Copy A • (except Forms W-2G).

2.2.4 Where Mail completed paper forms to the IRS service center shown on the back of **To File** Form 1096 and in the 2000 General Instructions for Forms 1099, 1098, 5498, and W-2G. Specific information needed to complete the forms mentioned in this revenue procedure are given in the specific form instructions. A chart is included in the 2000 General Instructions for Forms 1099, 1098, 5498, and **W-2G** giving a quick guide to which form must be filed to report a particular payment.

Part 3 Specifications for Substitute Form W-2G (Filed With the IRS)

Section 3.1 - General

3.1.1 Purpose The following specifications give the format requirements for substitute Form W-2G (Copy A only), which is filed with the IRS.

A filer may use a substitute **Form W-2G** to file with the IRS (referred to as **"substitute Copy A").** The substitute form must be an exact replica of the official form with respect to layout and content.

Section 3.2 - Specifications for Copy A of Form W-2G

3.2.1 Substitute Form W-2G (Copy A)	You must follov W-2G.	v these specifications when printing substitute Copy A of Form
	Item	Substitute Form W-2G (Copy A)
	Paper Color and Quality	Paper for Copy A must be white chemical wood bond, or equivalent, 20 pound (basis 17 x 22-500), plus or minus 5 percent. The paper must consist substantially of bleached chemical wood pulp. It must be free from unbleached or ground wood pulp or post-consumer recycled paper. It also must be suitably sized to accept ink without feathering.
	Ink Color and Quality	All printing must be in a high quality nongloss black ink.

Typography	The type must be substantially identical in size and shape to the official form. All rules on the document are either $\frac{1}{2}$ point (.007 inch), 1 point (0.015 inch), or 3 point (0.045). Vertical rules must be parallel to the left edge of the document, horizontal rules to the top edge.
Dimensions	The official form is 8 inches wide x 3 ² / ₃ inches deep, exclusive of a ² / ₃ inch snap stub on the left side of the form. Any substitute Copy A must be the same dimensions. The snap feature is not required on substitutes. All margins must be free of print. The top and right margins must be ¹ / ₄ inch plus or minus .0313. If the top and right margins are properly aligned, the left margin for all forms will be correct. If the substitute forms are in continuous or strip form, they must be burst and stripped to conform to the size specified for a single form.
Hot Wax and Cold Carbon Spots	Hot wax and cold carbon spots are not permitted on any of the internal form plies. These spots are permitted on the back of a mailer top envelope ply. Interleaved carbons, if used, should be black and of good quality to avoid smudging.
Printer's Symbol	The Government Printing Office (GPO) symbol must not be printed on substitute Forms W-2G. Instead, the employer identification number (EIN) of the forms printer must be printed in the bottom margin on the face of each individual Copy A on a sheet. The form must not contain the statement "IRS approved" or any similar statement.
Catalog Number	The Catalog Number (Cat. No.) shown on Form W-2G is used for IRS distribution purposes and need not be printed on any substitute forms.

Part 4 Substitute Statements to Form Recipients and Form Recipient Copies

Section 4.1 - Specifications

4.1.1 Introduction If you do not use the official IRS form to furnish statements to recipients, you must furnish an acceptable substitute statement. To be acceptable, your substitute statement must comply with the rules in this section. In general, see Regulations sections 1.6042-4, 1.6044-5, 1.6049-6, and 1.6050N-1 to determine how certain statements must be provided to recipients (statement mailing requirements for most Forms 1099-DIV and 1099-INT, all Forms 1099-OID and 1099-PATR, and Form 1099-MISC or 1099-S for royalties).

Note: A trustee of a grantor-type trust may choose to file **Forms 1099** and furnish a statement to the grantor under Regulations sections 1.671-4(b)(2)(iii) and (b)(3)(ii). The statement required by those regulations is not subject to the requirements outlined in this section.

4.1.2 Substitute Statements to Recipients for Certain Forms 1099-INT and 1099-DIV, and for Forms 1099-OID and 1099-PATR

The rules in this section apply to **Form 1099-INT** (except for interest reportable under section 6041), **1099-DIV** (except for section 404(k) dividends), **1099-OID**, and **1099-PATR only**. You may furnish form recipients with **Copy B** of the official Form 1099 or a substitute Form 1099 (form recipient statement) if it contains the same language as the official IRS form (such as aggregate amounts paid to the form recipient, any backup withholding, the name, address, and TIN of the person making the return, and any other information required by the official form). Except for state income tax withholding information, information not required by the official form should not be included on the substitute form.

You may enter a total of the individual accounts listed on the form only if they have been paid by the same payer. For example, if you are listing interest paid on several accounts by one financial institution on Form 1099-INT, you may also enter the total interest amount. You may also enter a date next to the corrected box if that box is checked.

A substitute form recipient statement for **Forms 1099-INT**, **1099-DIV**, **1099-OID**, or **1099-PATR** must comply with the following requirements:

- Box captions and numbers that are applicable must be clearly identified, using the same wording and numbering as on the official form.
 Note: For Form 1099-INT, if box 3 is not on your substitute form, you may drop "not included in box 3" from the box 1 caption.
- 2. The form recipient statement must contain all applicable form recipient instructions provided on the front and back of the official IRS form. Those instructions may be provided on a separate sheet of paper.
- **3.** The form recipient statement must contain the following in bold and conspicuous type:

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

- **4.** The box caption **"Federal income tax withheld"** must be in boldface type on the form recipient statement.
- 5. The form recipient statement must contain the Office of Management and Budget (OMB) number as shown on the official IRS form. See Part 5.
- 6. The form recipient statement must contain the tax year (e.g., 2000), form number (e.g., Form 1099-INT), and form name (e.g., Interest Income) of the official IRS Form 1099. This information must be displayed prominently together in one area of the statement. For example, the tax year, form number, and form name could be shown in the upper right part of the statement. Each copy must be appropriately labeled (such as Copy B, For Recipient). See Section 4.4 for applicable labels and arrangement of assembly of forms.

Note: *Do not include the words "Substitute for" or "In lieu of" on the form recipient statement.*

- 7. Layout and format of the form is at the discretion of the filer. However, the IRS encourages the use of boxes so that the statement has the appearance of a form and can be easily distinguished from other nontax statements.
- 8. Each recipient statement of Forms 1099-DIV, 1099-INT, 1099-OID, and 1099-PATR *must* include the direct access telephone number of an individual who can answer questions about the statement. Include that telephone number conspicuously anywhere on the recipient statement.
- **9.** Until new regulations are issued, the IRS will not assess penalties for use of a logo (e.g., the name of the payer in any typeface, font, or style, and/or a symbolic icon) or slogan on a recipient statement if the logo or slogan is used by the payer in the ordinary course of its trade or business. In addition, use of the logo or slogan must not make it less likely for a reasonable payee to recognize the importance of the statement for tax

reporting purposes.

10. A mutual fund family may state separately on one document (e.g., one piece of paper) the dividend income earned by a recipient from each fund within the family of funds as required by Form 1099-DIV. However, each fund and its earnings must be stated separately. The form must contain an instruction to the recipient that each fund's dividends and name, not the name of the mutual fund family, must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds. In addition, a mutual fund family may furnish a single statement (as a single filer) for Forms 1099-INT, 1099-DIV, and 1099-OID information. Each fund and its earnings must be stated separately. The form must contain an instruction to the recipient that each fund's dividend and its earnings must be stated separately. The form must contain an instruction to the recipient that each fund's earnings and name, not the name of the mutual fund family, must be reported on the recipient's tax return. The form cannot contain that each fund's earnings and name, not the name of the mutual fund family, must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds.

4.1.3 Substitute Statements to Recipients for Certain Forms 1098, 1099, 5498, and W-2G Statements to form recipients for Forms 1098, 1098-E, 1098-T, 1099-A, 1099-B, 1099-C, 1099-G, 1099-LTC, 1099-MISC, 1099-MSA, 1099-R, 1099-S, 5498, 5498-MSA, W-2G, 1099-DIV (only for section 404(k) dividends reportable under section 6047), and 1099-INT (only for interest of \$600 or more made in the course of a trade or business reportable under section 6041) can be copies of the official forms or an acceptable substitute. To be acceptable, a substitute form recipient statement must meet the following requirements.

- 1. The tax year, form number, and form name must be the same as the official form and must be displayed prominently together in one area on the statement. For example, they may be shown in the upper right part of the statement.
- 2. The filer's and the form recipient's identifying information required on the official IRS form must be included.
- Each substitute recipient statement for Forms W-2G, 1098, 1098-E, 1098-T, 1099-A, 1099-B, 1099-DIV, 1099-G (excluding state and local income tax refunds), 1099-INT, 1099-LTC, 1099-MISC (excluding fishing boat proceeds), 1099-OID, 1099-PATR, and 1099-S *must* include the direct access telephone number of an individual who can answer questions about the statement. You may include the telephone number conspicuously anywhere on the recipient statement. Although not required, payers reporting on Forms 1099-C, 1099-MSA, 1099-R, 5498, and 5498-MSA are encouraged to furnish telephone numbers.
- 4. All applicable money amounts and information, including box numbers, required to be reported to the form recipient must be titled on the form recipient statement in substantially the same manner as those on the official IRS form. The box caption "Federal income tax withheld" must be in boldface type on the form recipient statement.

Exception. If you are reporting a payment as "Other income" in box 3 of **Form 1099-MISC**, you may substitute appropriate language for the box title. For example, for payments of accrued wages and leave to a beneficiary of a deceased employee, you might change the title of box 3 to "Beneficiary payments" or something similar. **Note:** *You cannot make this change on Copy A*.

5. You must provide appropriate instructions to the form recipient, similar to those on the official IRS form, to aid in the proper reporting on the form recipient's income tax return. For payments reported on Form 1099-B, the requirement to include instructions substantially similar to those on the official IRS form may be satisfied by providing form recipients with a single set of instructions for all Forms 1099-B statements required to be furnished in a calendar year.

Note: If Federal income tax is withheld and shown on Form 1099-R or W-2G, Copy B and Copy C must be furnished to the recipient. If Federal income tax is not withheld, only Copy C of Form 1099-R and W-2G must be furnished. However, for Form 1099-R, instructions similar to those on the back of the official Copy B and Copy C of Form 1099-R must be furnished to the recipient. For convenience, you may choose to provide both Copies B and C of Form 1099-R to the recipient.

- **6.** If you use carbon to produce recipient statements, the quality of the carbon must meet the following standards:
 - All copies must be clearly legible,
 - All copies must be able to be photocopied, and

• Fading must not diminish legibility and the ability to photocopy. In general, black chemical transfer inks are preferred, but other colors are permitted if the above standards are met. Hot wax and cold carbon spots are not permitted on any of the internal form plies. The back of a mailer top envelope ply may contain these spots.

- 7. A mutual fund family may state separately on one document (e.g., one piece of paper) the **Form 1099-B** information for a recipient from each fund as required by Form 1099-B. However, the gross proceeds, etc., from each transaction within a fund must be stated separately. The form must contain an instruction to the recipient that each fund's (not the mutual fund family's) name and amount must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds.
- **8.** You may use a Uniform Settlement Statement (under the Real Estate Settlement Procedures Act of 1974 (RESPA)) for **Form 1099-S.** The Uniform Settlement Statement is acceptable as the written statement to

the transferor if you include the legend for **Form 1099-S** in **Section 4.3.2** and indicate which information on the Uniform Settlement Statement is being reported to the IRS on Form 1099-S.

- 9. For reporting state income tax withholding and state payments, you may add an additional box(es) to recipient copies as appropriate.
 Note: You cannot make this change on Copy A.
- **10.** On **Copy C of Form 1099-LTC**, you may reverse the location of the policyholder's and the insured's name, street address, city, state, and ZIP code for easier mailing.
- 11. Logos are permitted on substitute recipient statements for the forms listed in this section (Section 4.1.3).

Section 4.2 - Composite Statements

1099-PATR

4.2.1 A composite form recipient statement is permitted for reportable payments of interest, dividends, original issue discount, patronage dividends, and royalties Composite (Forms 1099-INT (except for interest reportable under section 6041), 1099-**Substitute** DIV (except for section 404(k) dividends), 1099-MISC or 1099-S (for **Statements for** rovalties only), 1099-OID, or 1099-PATR) when one payer is reporting more **Certain Forms** 1099-INT, than one of these payments during a calendar year to the same form recipient. 1099-DIV, Generally, do not include any other Form 1099 information (e.g., 1098 or 1099-MISC, 1099-A) on a composite statement with the information required on the forms and 1099-S, listed in the preceding sentence. and for Forms 1099-OID and Exception. A filer may include Form 1099-B information on a composite

Exception. A filer may include Form 1099-B information on a composite form with the forms listed above.

Although the composite form recipient statement may be on one sheet, the format of the composite form recipient statement must satisfy the following requirements in addition to the requirements listed earlier in **Section 4.1.2**.

- All information pertaining to a particular type of payment must be located and blocked together on the form and separate from any information covering other types of payments included on the form. For example, if you are reporting interest and dividends, the Form **1099-INT** information must be presented separately from the Form **1099-DIV** information.
- The composite form recipient statement must prominently display the tax year, form number, and form name of the official IRS form together in one area at the beginning of each appropriate block of information.
- Any information required by the official IRS forms that would otherwise be repeated in each information block is required to be listed only once in the first information block on the composite form. For example, there is no requirement to report the name of the filer in each information block. This rule does not apply to any money amounts (e.g., Federal income tax withheld) or to any other information that applies to money amounts.
- A composite statement is an acceptable substitute only if the type of payment and the recipient's tax obligation with respect to the payment are as clear as if each required statement were furnished separately on an official form.

4.2.2 Composite Substitute Statements to Recipients for Forms	A composite form recipient statement for the forms specified in Section 4.1.3 is permitted when one filer is reporting more than one type of payment during a calendar year to the same form recipient. A composite statement is not allowed for a combination of forms listed in Section 4.1.3 and forms listed in Section 4.1.2.
Specified in Section 4.1.3	Exceptions. Form 1099-B information may be reported on a composite form with the forms specified in Section 4.1.2 as described in Section 4.2.1. In addition, royalties reported on Form 1099-MISC or 1099-S may be reported on a composite form only with the forms specified in Section 4.1.2.
	Although the composite form recipient statement may be on one sheet, the format of the composite form recipient statement must satisfy the requirements listed in Section 4.2.1 as well as the requirements in Section 4.1.3 . A composite statement of Forms 1098 and 1099-INT (for interest reportable under section 6049) is not allowed.

Section 4.3 - Required Legends

4.3.1

Required Legends for Forms 1098 Form 1098 recipient statements (Copy B) must contain the following legends:Form 1098

- 1. "The information in boxes 1, 2, and 3 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return."
- 2. "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."
- Form 1098-E "This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest."
- Form 1098-T "This is important tax information and is being furnished to the Internal Revenue Service."

4.3.2	Forms 1099 and W-2G recipient statements must contain the following
Required	legends:
Legends for	• Forms 1099-A and 1099-C – Copy B
Forms 1099	"This is important tax information and is being furnished to the Internal
and W-2G	Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported."
	• Copy B of Forms 1099-B, 1099-DIV, 1099-G, 1099-INT, 1099-MISC,
	1099-OID, 1099-PATR and Copy C of Form W-2G
	"This is important tax information and is being furnished to the Internal
	Revenue Service. If you are required to file a return, a negligence penalty or
	other sanction may be imposed on you if this income is taxable and the IRS
	determines that it has not been reported."
	• Form 1099-LTC
	Copy B – "This is important tax information and is being furnished to the
	Internal Revenue Service. If you are required to file a return, a negligence
	penalty or other sanction may be imposed on you if this item is required to be

reported and the IRS determines that it has not been reported." **Copy** C – "Copy C is provided to you for information only. Only the policyholder is required to report this information on a tax return."

• Form 1099-MSA – Copy B

"This information is being furnished to the Internal Revenue Service."

• Form 1099-R -

Copy B – "Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the Internal Revenue Service." **Copy C** – "This information is being furnished to the Internal Revenue Service."

• Form 1099-S – Copy B

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

• Form W-2G – Copy B

"This information is being furnished to the Internal Revenue Service. Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 2, attach this copy to your return."

4.3.3 Fo Required • Legends for Forms 5498

Form 5498 recipient statements (Copy B) must contain the following legends:
Form 5498 – "This information is being furnished to the Internal Revenue"

Service." Note: If you do not furnish another statement to the participant because no contributions were made for the year, the statement of the

- fair market value of the account must contain this legend and a designation of which information is being furnished to the Internal Revenue Service.
- Form 5498-MSA "The information in boxes 1 through 6 is being furnished to the Internal Revenue Service."

Section 4.4 - Miscellaneous Instructions for Copies B, C, D, 1, and 2

4.4.1 Copies	 Copies B, C, and in some cases, D, 1, and 2 are included in the official assembly for the convenience of the filer. You are not legally required to include all these copies with the privately printed substitute forms. Furnishing Copies B and, in some cases, C will satisfy the legal requirement to provide statements of information to form recipients. Note: <i>If an amount of Federal income tax withheld is shown on Form 1099-R or W-2G, Copy B (to be attached to the tax return) and Copy C must be furnished to the recipient. Copy D (Forms 1099-R and W-2G) may be used for filer records. Only Copy A should be filed with the IRS.</i>
4.4.2 Arrangement of Assembly	 Copy A ("For Internal Revenue Service Center") of all forms must be on top. The rest of the assembly must be arranged, from top to bottom, as follows. For: Form 1098—Copy B "For Payer"; Copy C "For Recipient." Form 1098—Copy B "For Borrower"; Copy C "For Recipient." Form 1098-T—Copy B "For Student"; Copy C "For Recipient." Form 1099-A—Copy B "For Borrower"; Copy C "For Iender." Form 1099-A, Copy B "For Borrower"; Copy C "For Lender." Forms 1099-B, 1099-DIV, 1099-G, 1099-INT, 1099-MISA, 1099-OID, and 1099-PATR—Copy B "For Recipient"; Copy C "For Payer." Form 1099-C—Copy B "For Debtor"; Copy C "For Insured"; and Copy D "For Payer." Form 1099-LTC—Copy B "For State Tax Department"; Copy B "For Recipient"; Copy 2 "To be filed with recipient's state income tax return, when required"; and Copy C "For State, City, or Local Tax Department"; Copy B "Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 4, attach this copy to your return"; Copy C "For Recipient's Records"; Copy 2 "For Filer." Form 1099-S—Copy B "For Participant"; Copy C "For Trustee or Issuer." Form 5498-MSA—Copy B "For Participant"; Copy C "For Trustee." Form W-2G—Copy 1 "For State Tax Department"; Copy B "Report this income on your Federal tax return, withheld in box 2, attach this copy to your return"; Copy C "For Filer."

Records"; Copy 2 "Attach this copy to your state income tax return, if required."; Copy D "For Payer."

4.4.3 Perforations are required between forms on all copies except Copy A to make separating the forms easier. (Copy A of Form W-2G may be perforated.)

Part 5 Additional Instructions for Substitute Forms 1098, 1099, 5498, and W-2G

Section 5.1 - OMB Requirements

5.1.1 OMB Requirements	 The Paperwork Reduction Act of 1995 (Public Law 104-13) requires that: The OMB approves all IRS tax forms that are subject to the Paperwork Reduction Act. Each form shows the OMB approval number in or near the upper right corner. (The official OMB numbers may be found on the official IRS printed forms and are also shown on the forms in the exhibits in Part 6.) The form (or its instructions) states: Why the IRS needs the information, How it will be used, and Whether or not the information is required to be furnished to the IRS.
5.1.2 Substitute Form Requirements	 The OMB requirements for substitute IRS forms are: Any substitute form or substitute statement to a recipient must show the OMB number as it appears on the official IRS form. For Copy A, the OMB number must appear exactly as shown on the official IRS form. For any copy other than Copy A, the OMB number must use one of the following formats. OMB No. XXXX-XXXX (preferred) or OMB # XXXX-XXXX
5.1.3 Required Explanation to Users	All substitute forms (Copy A only) must state "For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General Instructions for Forms 1099, 1098, 5498, and W-2G." If no instructions are provided to users of your forms, you must furnish them the exact text of the Privacy Act and Paperwork Reduction Act Notice.

Section 5.2 - Reproducible Copies

5.2.1 The IRS does not take orders for reproducible and information copies ofIntroduction Federal tax materials. However, other ways to get Federal tax material include:

- The Internet.
- CD-ROM.
- GPO Superintendent of Documents Bookstores.

Forms 1096, 1098, 1099 series, and 5498 series are provided electronically on the IRS home page and on the Federal Tax Forms CD-ROM, but cannot be used for filing with the IRS when printed from a conventional printer. These forms contain drop-out ink requirements as described in Part 2 of this publication.

5.2.2 Internet You can download tax materials from the Internet.

You Can Access the Internet by	Using
File Transfer Protocol (FTP)	ftp.irs.gov
World Wide Web	www.irs.gov

5.2.3 IRS Federal Tax Forms CD-ROM	The IRS also offers an alternative to downloading electronic files and provides current and prior-year access to tax forms and instructions through its Federal Tax Forms CD-ROM. The CD will be available for the upcoming filing season. Order Pub. 1796 , Federal Tax Products on CD-ROM, by using the IRS's Internet Web Site at www.irs.gov/cdorders.
5.2.4 GPO Supt. of Documents Bookstores	The Government Printing Office (GPO) Superintendent of Documents Bookstores also sell individual copies of tax forms, instructions, and publications.

Section 5.3 - Effect on Other Revenue Procedures

5.3.1 Other	Revenue Procedure 99-34, 1999-40 I.R.B. 450, which provides rules and
Revenue	specifications for private printing of 1999 substitute forms and statements to
Procedures	recipients, is superseded.

Part 6 Exhibits

Section 6.1 - Exhibits of Forms in the Revenue Procedure

6.1.1 Purpose	Exhibits A through T illustrate some of the specifications that were discussed earlier in this revenue procedure. The dimensions apply to the actual size forms, but the exhibits have been reduced in size.
	Generally, the illustrated dimensions apply to all like forms. For example, Exhibit B shows 11.00" from the top edge to the bottom edge of Form 1098 and .85" between the bottom rule of the top form and the top rule of the second form on the page. These dimensions apply to all forms that are printed three to a page.
6.1.2 Guidelines	 Keep in mind the following guidelines when printing substitute forms. Closely follow the specifications to avoid delays in processing the forms. Always use the specifications as outlined in this revenue procedure and illustrated in the exhibits. Do not add the text line "Do NOT Cut or Separate Forms on This Page" to the bottom form. This will cause inconsistency with the specifications.

Exhibit A

		<u> </u>		 A		m m m		-	nittel	of	↑	OM	3 No. 1545-01
	J96			Ann			y and 1 mation			OT		G	20 00
Department of Internal Reve	nue Service						-						
FILI	ER'S nan	ne											
1							1.33"				2.25"		
Street address (including room or suite number)													
L Oli										= 7.30"=			
trend terms	y, state, a	ind ZIP c	ode										
If you are							n to contact	t if the IR	3	For (Official	l Use	Only
box 1 or a used as t				mber you turns bein	-	hone nur				חר		П	1 [[]
transmitte					()							
	identification 1.40"			rity number 0"=====	3 Tot	al number <u>ms</u> 1.20	of 4 I		ome tax withh 0"=====		tal amount re	•	this Form 109
Enter an "	'X" in only	one box b	elow to in	dicate the	type of for			his is you	r FINAL re	turn, enter	r an "X" he	ere .	. ► 🗌
W-2G 32	1098 81	1098-E 84	1098-T 83	1099-A 80	1099-B 79	1099-C 85	1099-DIV 91	1099-G 86	1099-INT 92	1099-LTC 93	1099-MISC 95	2 1099-M 94	SA 1099-OI 96
€.52"													
1099-PATR 97	1099-R 98	1099-S 75	5498 28	5498-MSA 27									
Under pen	alties of pe			ve examined			enue Sei			-		-	
Under pen correct, and Signature	alties of per complete.	rjury, I decla	are that I ha	ve examined		and accor Title ▶	npanying docu	uments, and	d, to the be	st of my kno	owledge an Dat	d belief, tł e ►	ney are true,
Under pen correct, and Signature Instrue Purpose of 1098, 5498 Where To TRANSMIT Information Use of pre the IRS wi address ar necessary However, of number (T label. Use Package	A lities of percent complete. Ctions of form. U 8, and W- File on the T MAGNE n Returns eprinted I th Package changes do not us in Returns e only the 1099. re not using the change, ac he same 099, 1098 of mortgage an interes	rjury, I decla rjury, I decla Use this fo 2G to the ne back.) TIC MEDI Reported label. If yo ge 1099, p form insi to your na e the labe n is incorrec IRS-prep ng a prepi oom, suita d on the fo ddress, an as those 3, 5498, o ge interest t, an educ	rm to trar = 8.00" rm to trar Internal I DO NOT I A. See Fc I Magnetic blace the de the bra ame and a ed if the ta ed	ve examined memory of the second second revenue S USE FORI orm 4804, cally/Elect ed a prepri- label in the ackets. Ma address or xpayer ide of prepare el that call el, enter the r unit num the filer of r in the u A filer inclu s (includin stitution, a	d this return d this return Service. (S M 1096 TC Transmitt ronically. inted label e name ar ake any n the labe entification e your ow me with y he filer's na ber), and on this fo pper left a udes a pay a broker, a	and accor Title ► 11 1099, iee D al of I from nd I. im rour ame, TIN in rm area yer, a or a	npanying docu npanying docu folded). group v both Fo transmi your Fo returns contain Summa entered Box 1 label. In social s others box 1. enter th Box 3. Form 1 1096 in forms, if you s Form 1 on that	intting to a Group t with a se orms 109 it your Fo orms 109 separate ing sumr ary inform d only in l or 2. Cor ndividuals security n must ent However heir SSN Enter the 096. Do n your tot not the n send one 096 and page, er	the IRS. the IRS. the forms is parate Foc parate Foc parate Foc parate Soc parate Ion s and 108 9-A. You by Do no nary (subt hation for boxes 3, 4 mplete onl s not in a sumber (Si er their er , sole prop in box 2. e number not includ al. Enter t umber of page of t you have iter "2" in	Send the by form n rm 1096. 99-A, com and anoineed not t send a total) infor the group I, and 5 c y if you a trade or t SN) in boo nployer ic porietors w of forms y e blank o he numbe pages, be hree-to-a- correctly box 3 of	owledge an Dat forms in For exam polete one ther Form submit or form (109 mation w o of forms of Form 10 re not usions business r x 2; sole p lentification tho do no you are tr r voided f er of corre eing trans -page For complete Form 10	e ► a flat m d belief, th a flat m d transm pple, if y e Form 1 1096 tc iginal an 9, 5498, ith Form being s 096. ing a pre- must ent proprietc on numb t have a ansmittili orms of ectly con- mitted. I ms 5498 d two Fo 26.	ailing (not nit each ou must fil 096 to transmit d correcte etc.) 1096. ent is eprinted IR er their ors and all er (EIN) in n EIN mus ng with thi the Form npleted For examp

Exhibit B

Д 1. Д 1.				.50"		4 70"	
			<u>GIED</u>				
							Mortgag
2 11					ിതെന		Intere
))	Stateme
					I		
							1
	n no. PAYER'S socia	-			1, 2, ()	orrower(s)	Сору
			- T				F
BORROWER'S name			2 Points paid	on purchase	of principal reside	nce	Internal Reven Service Cent
	3.40	·	¢				File with Form 109
dress (including apt	no.)			verpaid intere	est		For Privacy A
aroos (including apti							and Paperwo Reduction A
e, and ZIP code				# 83"			Notice, see t
			2				2000 Gener
number (optional)							Instructions f
			,	₩			5498, and W-2
8		Cat	. No. 14402K		Department	the Treasury -	- Internal Revenue Serv
Cut or Sep	arate Forms o	on This Page	— Do	NOT Cu	11		
7.30"							
				8.00	"8	5"	
			CTED		V		
IT'S/LENDER'S name	, address, and telepho	ne number			OMB No. 1545-	0901	
							Mortgag
					2(0)		Intere
							Stateme
					Form 1098	3	
T'S Federal identification	n no. PAYER'S socia	al security number	1 Mortgage in	nterest receive			Com
		,			1	(-)	Copy
BORROWER'S name	₽		-	on purchase	of principal reside	nce	Internal Reven
							Service Cent
			\$				File with Form 109
dress (including apt.	no.)		3 Refund of c	overpaid intere	est		For Privacy A and Paperwo
			\$				Reduction A
e, and ZIP code			4				Notice, see t 2000 Gene
							Instructions f
number (optional)							Forms 1099, 109 5498, and W-2
					•	,	
Cut or Sep	arate Forms o	on This Page	— Do	NOT Cu	t or Separa	ate Form	s on This Pag
11	.00"						
8181			CTED				
IT'S/LENDER'S name	, address, and telepho	ne number			OMB No. 1545-	0901	
							Mortgag
					1 2006		Intere
							Stateme
					Farm 1009	2	
T'S Endoral identificati		al socurity number	1 Mortagao ir	torost rossivo			
			00	NGIGGL IECEIVE	a nom payer(s//DC	511 OWEI (5)	Сору
BORROWER'S name				on purchase	of principal reside	nce	F Internal Reven
_ 5 5 MER O Ham			onto paid		popui 100106		Service Cent
			\$				File with Form 109
	no.)			overpaid intere	est		For Privacy A
dress (including apt.							and Paperwo Reduction A
dress (including apt.			Ф				
dress (including apt. e, and ZIP code			\$				
							Notice, see t 2000 Gener
							Notice, see t
	T'S Federal identification T S Federal identification T S Federal identification a, and ZIP code number (optional) 8 Cut or Sep 7.30" 8 Cut or Sep 7.30" 8 1 1 1 1 1 1 1 1	IT'S/LENDER'S name address, and telepho "" PAYER'S socia TS Federal identification no. PAYER'S socia #1.70" PAYER'S socia /BORROWER'S name 3.40' dress (including apt. no.) a, and ZIP code number (optional) PAYER'S socia 8 VOIE 7.30" VOIE ALAL VOIE IT'S/LENDER'S name, address, and telepho /BORROWER'S name /BORROWER'S name /BORROWER'S name /dress (including apt. no.) a, and ZIP code number (optional) 8 Cut or Separate Forms of 11.00" ALAL VOIE TS/LENDER'S name, address, and telepho	T'S/LENDER'S name " T'S Federal identification no. PAYER'S social security number " "BORROWER'S name 3,40" 'BORROWER'S name 3,40" 'and ZIP code number (optional) 8 Cat 'Cut or Separate Forms on This Page 'SO" 'BORROWER'S name 'S' Federal identification no. PAYER'S social security number (BORROWER'S name 'dress (including apt. no.) a, and ZIP code 'T'S Federal identification no. PAYER'S social security number 'BORROWER'S name dress (including apt. no.) a, and ZIP code number (optional) 8 Cat 'Cut or Separate Forms on This Page 11.00" ALBL 'Cut or Separate Forms on This Page 11.00" ALBL 'Cut or Separate Forms on This Page 11.00" ALBL 'Cut or Separate Forms on This Page 11.00" ALBL 'VOID CORRE T'S Federal identification no. PAYER'S social security number	T'S/LENDER'S name address, and telephone number 1 Mortgage in "" \$ \$ \$ T'S Federal identification no. PAYER'S social security number 1 Mortgage in 1.70" \$ \$ \$ \$ ifBORROWER'S name 3.40" \$ \$ \$ dress (including apt. no.) 3 Refund of c \$ \$ a, and ZIP code 4 2 2 Points paid % Cat. No. 14402K Cat. No. 14402K \$ T Cut or Separate Forms on This Page Do Do \$ %.30" \$ \$ \$ \$ #ITS/LENDER'S name address, and telephone number 1 Mortgage in T'S Federal identification no. PAYER'S social security number 1 Mortgage in % * 2 Points paid \$ gress (including apt. no.) \$ \$ \$ \$ % * 2 Points paid \$ \$ gress (including apt. no.) \$ \$ Refund of c \$	TTS/LENDER'S name address, and telephone number " 1 Mortgage inferest receive 1.70" 2 Points paid on purchase 3.40" \$ 2 "BORROWER'S name 3.40" \$.and ZIP code 4 2.83" number (optional) Cat. No. 14402K 8.00 Cut or Separate Forms on This Page — Do NOT Cur %.30" 8.00 Corrected TS/LENDER'S name 2 Points paid on purchase %.30"	TS-LENDER'S name address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Address, and telephone number TG-DEROWER'S name Cdt. No. 14402K Department of Cut or Separate Forms on This Page TG-DeNOT Cut or Separate Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cut or Separate Forms on This Page Cdt. No. 14402K Department of Cdt. No. 14402K Department	TSPLENDER'S name, address, and telephone number TS Fideral identification no. PAYER'S social security number 1.100 PAYER'S social security number 2.2000 Form 1098 Porm 1098

Exhibit C

8484		ECTED		
RECIPIENT'S/LENDER'S name, addr	ess, and telephone number		OMB No. 1545-1576	Student Loan Interest Statement
RECIPIENT'S Federal identification no.	BORROWER'S social security number	1 11	Form 1098-E terest received by lender	Сору А
BORROWER'S name Street address (including apt. no.)	3.40"	≪\$	2.80"	For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork
City, state, and ZIP code		2.8	33"	Reduction Act Notice, see the 2000 General
Account number (optional)				Instructions for Forms 1099, 1098, 5498, and W-2G.
Bundary Cut or Separat			OMB No. 1545-1576	_
			20 00 Form 1098-E	Student Loan Interest Statement
RECIPIENT'S Federal identification no.	BORROWER'S social security number	1 Student loan int	terest received by lender	Copy A
BORROWER'S name		Ψ		For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)				For Privacy Act and Paperwork Reduction Act Notice, see the
City, state, and ZIP code Account number (optional)		-		2000 General Instructions for Forms 1099, 1098,
				5498, and W-2G.
Form 1098-E Do NOT Cut or Separat <u>8484</u> RECIPIENT'S/LENDER'S name, addr	e Forms on This Page	at. No. 25088U — Do NO ECTED	Department of the Treasu DT Cut or Separate Fo OMB No. 1545-1576 2000 Form 1098-E	rms on This Page Student Loan Interest Statement
RECIPIENT'S Federal identification no.	BORROWER'S social security number		terest received by lender	Сору А
BORROWER'S name Street address (including apt. no.)		-		For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork
City, state, and ZIP code				Reduction Act Notice, see the 2000 General Instructions for
Account number (optional)		at No. 2508911		Forms 1099, 1098, 5498, and W-2G.

Exhibit D

.33"				
BBB∃◀ FILER'S name, street address, city, s	state, ZIP code, and telephone number	CTED	─────────────────────────────────────	Tuitiou
		2 ◀──── 1.40" ───►	20 00 Form 1098-T	Tuition Payments Statement
FILER'S Federal identification no.	STUDENT'S social security number			Сору А
STUDENT'S name	3.40"			For Internal Revenue ^{.23} Service Center ◄
				File with Form 1096.
Street address (including apt. no.)				and Paperwork Reduction Act Notice, see the
City, state, and ZIP code		2.8	80" ————	2000 General
Account number (optional)		3 Check if at least half-time student .	4 Check if a graduate student	Forms 1099, 1098, 5498, and W-2G.
8383	te Forms on This Page	ECTED	OMB No. 1545-1574	orms on This Page
		2	20 00 Form 1098-T	Tuition Payments Statement
FILER'S Federal identification no.	STUDENT'S social security number			Сору А
STUDENT'S name				For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)				For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code				Notice, see the 2000 General Instructions for
Account number (optional)		3 Check if at least half-time student	4 Check if a graduate student	Forms 1099, 1098, 5498, and W-2G.
⁼ orm 1098-T Do NOT Cut or Separat ∆3&3	ca te Forms on This Page		or Separate Fo	ury - Internal Revenue Service orms on This Page
FILER'S name, street address, city, s	state, ZIP code, and telephone number	1	OMB No. 1545-1574	Tuition
		2	2000	Payments Statement
			Form 1098-T	
FILER'S Federal identification no.	STUDENT'S social security number			Copy A For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)				For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code				Notice, see the 2000 General Instructions for
Account number (optional)		3 Check if at least half-time student .	4 Check if a graduate student	Forms 1099, 1098, 5498, and W-2G.
orm 1098-T	Ca	at. No. 25087J		ury - Internal Revenue Service

Exhibit E

	CTED		
LENDER'S name, street address, city, state, ZIP code, and telephone no.		OMB No. 1545-0877	Acquisition or
		2000	Abandonment of
			Secured Property
	▲ Data of lander's convisition or	Form 1099-A	
LENDER'S Federal identification number BORROWER'S identification number	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding	Сору А
		\$	For
BORROWER'S name	3	4 Fair market value of	property Internal Revenue Service Center
		\$ 1.40"=	File with Form 1096.
Street address (including apt. no.)	5 Was borrower personally lial	<u>Ψ</u> ole for repayment of the	For Privacy Act and
		Yes	
City, state, and ZIP code	6 Description of property	-	Notice, see the 1.80 ^m 2000 General
Account number (optional)	-		Instructions for Forms 1099, 1098,
			5498, and W-2G.
BOBD INDIAN Cut or Separate Forms on This Page		t or Separate	Forms on This Page
LENDER'S name, street address, city, state, ZIP code, and telephone no.		OMB No. 1545-0877	
		ചെല്ല	Acquisition or
		2000	Abandonment of Secured Property
		Form 1099-A	
	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding	
LENDER'S Federal identification number BORROWER'S identification number		\$	Copy A For
BORROWER'S name	3	 Φ 4 Fair market value of 	property Internal Revenue
			Service Center File with Form 1096.
Otwast address (including ant no.)	5 Was borrower personally liab	\$	Ear Drivoov Act and
Street address (including apt. no.)	5 was borrower personally lial	Yes	No Paperwork
City, state, and ZIP code	6 Description of property		Notice, see the
	-		2000 General Instructions for
Account number (optional)			Forms 1099, 1098, 5498, and W-2G.
Form 1099-A Ca Do NOT Cut or Separate Forms on This Page			reasury - Internal Revenue Service Forms on This Page
LENDER'S name, street address, city, state, ZIP code, and telephone no.		OMB No. 1545-0877	
		2000	Acquisition or Abandonment of
			Secured Property
		Form 1099-A	
	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding	
LENDER'S Federal identification number BORROWER'S identification number		\$	Copy A
BORROWER'S name	3	 Ψ 4 Fair market value of 	
			Service Center File with Form 1096.
Street address (including ant the)	5 Was borrower personally liab	\$	Ear Driveey Act and
Street address (including apt. no.)	was borrower personally liat	Sie for repayment of the	No Reduction Act
City, state, and ZIP code	6 Description of property		Notice, see the 2000 General
	1		Instructions for
Account number (antional)			
Account number (optional)			Forms 1099, 1098, 5498, and W-2G

Exhibit F

ା ା ା ମହାର କରି କରି କରି କରି କରି କରି କରି କରି କରି କର	
	eeds From Broker and Exchange ansactions
2 Stocks, bonds, etc. Reported to IRS Gross proceeds 1.90"	s and option premium
PAYER'S Federal identification number RECIPIENT'S identification number 3 Bartering 4 Federal income tax withheld	Сору А
	For rnal Revenue ervice Center
Ear P	rith Form 1096 Privacy Act and
2000 open contracts—12/31/99	Paperwork Reduction Ac
	Notice, see the 2000 Genera
Account number (optional) 2nd TIN Not.	nstructions for ns 1099, 1098
← 2.80" ← 4.15" ← 4.15" ← 4.15" ← 549 Form 1099-B ← 60" Cat. No. 14411V Department of the Treasury - Internal	98, and W-2 \$
<u>ର</u> ୁମ୍ବର ଅନ୍ୟର୍ଭ କରି ଅନ୍ୟର୍ଭ	eeds From Broker and
	^r Exchange ansactions
2 Stocks, bonds, etc. Reported } □ Gross proceeds \$ to IRS ↓ □ Gross proceeds less commissions	s and option premium
PAYER'S Federal identification number RECIPIENT'S identification number 3 Bartering 4 Federal income tax withheld \$	Сору А
RECIPIENT'S name 5 Description Inter	Foi rnal Revenue ervice Centei
9	vith Form 1096
2000 open contracts—12/31/99	rivacy Act and Paperwork Reduction Ac
	Notice, see the
City, state, and ZIP code \$ 9 Aggregate profit or (loss) on 9 Aggregate profit or (loss)	2000 Genera
Image: City, state, and ZIP code \$ \$ N Account number (optional) 2nd TIN Not. 8 Unrealized profit or (loss) on open contracts—12/31/2000 9 Aggregate profit or (loss) In	nstructions for Ins 1099, 1098
City, state, and ZIP code \$ \$ N Account number (optional) 2nd TIN Not a a a a a	Istructions for Ins 1099, 1098 98, and W-2G
City, state, and ZIP code \$ \$ N Account number (optional) 2nd TIN Not. * 9 Aggregate profit or (loss) on open contracts—12/31/2000 9 Aggregate profit or (loss) In Form 1099-B Cat. No. 14411V Department of the Treasury - Internal or Separate Forms on This Page Do NOT Cut or Separate Forms on This Page Do NOT Cut or Separate Forms on Separate Forms	Istructions for Ins 1099, 1098 98, and W-2G
City, state, and ZIP code \$<	Istructions for Ins 1099, 1098 98, and W-2G
City, state, and ZIP code \$<	eeds From
City, state, and ZIP code \$<	eeds From Broker and Exchange ansactions
City, state, and ZIP code \$<	eeds From Broker and Exchange ansactions
City, state, and ZIP code \$<	s and option premium s and option premium s and option premium
City, state, and ZIP code \$<	structions for ns 1099, 1098 98, and W-2G I Revenue Service This Page eeds From Broker and Exchange ansactions s and option premium Copy A For rnal Revenue ervice Center ith Form 1096
City, state, and ZIP code \$<	s and option premiume s and option premiume s and option premiume reverse Center inthe Form 1096 privacy Act and Paperwork Reduction Actions
City, state, and ZIP code \$<	structions for ns 1099, 1098 98, and W-2G I Revenue Service This Page eeds From Broker and Exchange ansactions s and option premium Copy A For rnal Revenue ervice Center with Form 1096 Privacy Act and Paperwork

Exhibit G

B585 CREDITOR'S name, street address, c	ity, state, and ZIP code		OMB No. 1545-1424	
				_
			2000	Cancellatior of Deb
CREDITOR'S Federal identification number	DEBTOR'S identification number	1 Date canceled	Form 1099-C 2 Amount of debt canceled	Conv
		▲ 1.40"==	→ € 1.40" →	Copy A Fo
DEBTOR'S name		3 Interest if included in	1 box 2 4	Internal Revenue Service Cente
	3.40"	\$		File with Form 1096
Street address (including apt. no.)		5 Debt description		For Privacy Act an Paperwor Reduction Ac
City, state, and ZIP code				Notice, see th 2000 Genera Instructions fo
Account number (optional)		6 Check for bankruptc	y 7 Fair market value of property \$	
orm 1099-C Do NOT Cut or Separat		Cat. No. 26280W	Department of the Treasury	
8585		ECTED		
CREDITOR'S name, street address, c	ity, state, and ZIP code		OMB No. 1545-1424	
			2000	Cancellation of Deb
			Form 1099-C	
CREDITOR'S Federal identification number	DEBTOR'S identification number	1 Date canceled	2 Amount of debt canceled \$	Copy /
DEBTOR'S name		3 Interest if included in		Internal Revenu Service Cente
		\$		File with Form 1096 For Privacy Act an
Street address (including apt. no.)		5 Debt description		Paperwor Reduction Ac Notice, see th
City, state, and ZIP code				2000 Genera
Account number (optional)		6 Check for bankrupto	y 7 Fair market value of property \$	
Form 1099-C		Cat. No. 26280W	Department of the Treasury	
Do NOT Cut or Separat			Cut or Separate Form	is on this Page
			2000	Cancellatior of Deb
			Form 1099-C	
CREDITOR'S Federal identification number	DEBTOR'S identification number	1 Date canceled	2 Amount of debt canceled	Сору
DEBTOR'S name		3 Interest if included in	\$ 1 box 2 4	Fo Internal Revenu Service Cente
		\$		File with Form 109
Street address (including apt. no.)		5 Debt description		For Privacy Act an Paperwor Reduction Ac
City, state, and ZIP code				Notice, see th 2000 Genera
Account number (optional)		6 Check for bankrupto	y 7 Fair market value of property	 Instructions for Forms 1099, 1098 5498, and W-20
orm 1099-C		Lat. No. 26280W	Department of the Treasury	

Exhibit H

DAVED'S nome streat - d-durant ''			GIED		
PAYER'S name, street address, city,	state, ZIP code, and telep	ohone no.	1 Ordinary dividends	OMB No. 1545-0110	
			\$		Dividends and
			2a Total capital gain distr.	2000	Distributions
			€====1.40"		
			\$	Form 1099-DIV	1
PAYER'S Federal identification number	RECIPIENT'S identificat	ion number	2b 28% rate gain \$	2c Unrecap. sec. 1250 gain	Copy A
RECIPIENT'S name			Ψ 2d Section 1202 gain	 Ψ 3 Nontaxable distributions 	For Internal Revenue
					Service Center
			\$	\$	File with Form 1096
Street address (including apt. no.)			4 Federal income tax withheld		For Privacy Act and Paperwork
City, state, and ZIP code			6 Foreign tax paid	\$7 Foreign country or U.S. possession	Reduction Act Notice, see the
			\$	· · · · · · · · · · · · · · · · · · ·	2000 General
Account number (optional)		2nd TIN Not.	8 Cash liquidation distr.	9 Noncash liquidation distr.	 Instructions for Forms 1099, 1098
€			\$\$ āt. No. 14415N	\$4.50"	5498, and W-2
Do NOT Cut or Separat	e Forms on Th:	is Page	— Do NOT Cut	t or Separate Form	s on This Page
9191			CTED	<u>. </u>	
PAYER'S name, street address, city,	state, ZIP code, and telep	ohone no.	1 Ordinary dividends	OMB No. 1545-0110	
			\$		Dividends and
			2a Total capital gain distr.	2000	Distributions
			\$	Form 1099-DIV	1
PAYER'S Federal identification number	RECIPIENT'S identificat	ion number	2b 28% rate gain \$	2c Unrecap. sec. 1250 gain	Сору А
RECIPIENT'S name			2d Section 1202 gain	 Φ 3 Nontaxable distributions 	For Internal Revenue Service Center
			\$	\$	File with Form 1096.
Street address (including apt. no.)			4 Federal income tax withheld	-	For Privacy Act and
			\$	\$	Paperwork Reduction Act
City, state, and ZIP code			6 Foreign tax paid	7 Foreign country or U.S. possession	Notice, see the 2000 General
Account number (optional)		2nd TIN Not.	*	9 Noncash liquidation distr.	Instructions for
					Forms 1099, 1098,
			\$	\$	5498, and W-2G.
Form 1099-DIV Do NOT Cut or Separat	e Forms on Th		\$ at. No. 14415N — Do NOT Cut	Department of the Treasury -	- Internal Revenue Service
Do NOT Cut or Separat 위고위고		is Page	TTED	t or Separate Form	
Do NOT Cut or Separat		is Page	at. No. 14415N — Do NOT Cut		- Internal Revenue Service Is on This Page
Do NOT Cut or Separat 9고9고		is Page	TTED	OMB No. 1545-0110	- Internal Revenue Service Is on This Page Dividends and
Do NOT Cut or Separat 9고9고		is Page	At. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends	t or Separate Form	- Internal Revenue Service Is on This Page Dividends and
Do NOT Cut or Separat 미고미		is Page	at. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends \$	OMB No. 1545-0110	- Internal Revenue Service Is on This Page Dividends and
Do NOT Cut or Separat 9고9고		is Page CORRE	at. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain	- Internal Revenue Service s on This Page Dividends and Distributions
Payer's Federal identification number	VOID state, ZIP code, and telep	is Page CORRE	at. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$	OMB No. 1545-0110 2000 Form 1099-DIV 2c Unrecap. sec. 1250 gain	- Internal Revenue Service s on This Page Dividends and Distributions Copy A For
Do NOT Cut or Separat	VOID state, ZIP code, and telep	is Page CORRE	at. No. 14415N Do NOT Cut CTED Ordinary dividends Ordinary dividends Total capital gain distr. 2a Total capital gain distr. 2b 28% rate gain 2d Section 1202 gain 	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions	 Internal Revenue Service Is on This Page Dividends and Distributions Copy A For Internal Revenue Service Center
Do NOT Cut or Separat 기기기 PAYER'S name, street address, city, a PAYER'S Federal identification number RECIPIENT'S name	VOID state, ZIP code, and telep	is Page CORRE	at. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$ 2d Section 1202 gain \$	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions	 Internal Revenue Service Is on This Page Dividends and Distributions Copy A For Internal Revenue Service Center File with Form 1096.
Do NOT Cut or Separat	VOID state, ZIP code, and telep	is Page CORRE	 at. No. 14415N Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$ 2d Section 1202 gain \$ 4 Federal income tax withheld 	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions	- Internal Revenue Service s on This Page Dividends and Distributions Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork
Payer's Federal identification number	VOID state, ZIP code, and telep	is Page CORRE	at. No. 14415N — Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$ 2d Section 1202 gain \$	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions \$ 5 Investment expenses	 Internal Revenue Service Internal Revenue Service Internal Revenue Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the
Do NOT Cut or Separat 기고기고 PAYER'S name, street address, city, street address, city, street address PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.)	VOID state, ZIP code, and telep	tion number	 At. No. 14415N Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$ 2b 28% rate gain \$ \$ 2d Section 1202 gain \$ \$ \$ 4 Federal income tax withheld \$ 6 Foreign tax paid 	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions \$ 5 Investment expenses	 Internal Revenue Service Internal Revenue Service Internal Revenue Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General
Do NOT Cut or Separat 기고기고 PAYER'S name, street address, city, street address, city, street address PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.)	VOID state, ZIP code, and telep	is Page CORRE	 at. No. 14415N Do NOT Cut CTED 1 Ordinary dividends \$ 2a Total capital gain distr. \$ 2b 28% rate gain \$ 2d Section 1202 gain \$ 4 Federal income tax withheld \$ 6 Foreign tax paid 	OMB No. 1545-0110 20000 Form 1099-DIV 2c Unrecap. sec. 1250 gain 3 Nontaxable distributions \$ 5 Investment expenses	 Internal Revenue Service Internal Revenue Service Internal Revenue Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the

Exhibit I

8686		CTED		
PAYER'S name, street address, city,	state, ZIP code, and telephone no.	Unemployment compensation 1.40" S State or local income tax refunds, credits, or offsets \$	OMB No. 1545-0120	Certain Government and Qualified State Tuition Program Payments
PAYER'S Federal identification number	RECIPIENT'S identification number	3 Box 2 amount is for tax year	4 Federal income tax withheld \$	Copy A
RECIPIENT'S name		5 Qualified state tuition program earnings	6 Taxable grants	For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)		 \$ 7 Agriculture payments \$ 	 S The amount in box 2 applies to income from a trade or business ► □ 	For Privacy Act and Paperwork 1.15" Reduction Act
City, state, and ZIP code				Notice, see the 2000 General Instructions for
Account number (optional)				Forms 1099, 1098, 5498, and W-2G.
Form 1099-G	Cat	. No. 14438M	Department of the Treasury -	Internal Revenue Service
Do NOT Cut or Separat	te Forms on This Page	- Do NOT Cu	it or Separate Form	is on This Page
8686		CTED		
PAYER'S name, street address, city,	state, ZIP code, and telephone no.	1 Unemployment compensation	OMB No. 1545-0120	Certain Government
		\$ 2 State or local income tax	2000	and Qualified State Tuition
		refunds, credits, or offsets	Form 1099-G	Program Payments
PAYER'S Federal identification number	RECIPIENT'S identification number	3 Box 2 amount is for tax year	4 Federal income tax withheld \$	Copy A For
RECIPIENT'S name		5 Qualified state tuition program earnings	6 Taxable grants	Internal Revenue Service Center
Street address (including apt. no.)		\$7 Agriculture payments	\$ 8 The amount in box 2	File with Form 1096. For Privacy Act and
,		\$	applies to income from a trade or business	Paperwork Reduction Act
City, state, and ZIP code				Notice, see the 2000 General Instructions for
Account number (optional)				Forms 1099, 1098, 5498, and W-2G.
Form 1099-G	Cat	. No. 14438M	Department of the Treasury -	Internal Revenue Service
BLBL	E Forms on This Page		it or Separate Form	
PAYER'S name, street address, city,	state, ZIP code, and telephone no.	1 Unemployment compensation	OMB No. 1545-0120	Certain Government
		\$	2000	and Qualified State Tuition
		2 State or local income tax refunds, credits, or offsets		Program
PAYER'S Federal identification number	RECIPIENT'S identification number	\$ 3 Box 2 amount is for tax year	Form 1099-G 4 Federal income tax withheld	Payments Copy A
RECIPIENT'S name		5 Qualified state tuition	\$6 Taxable grants	For Internal Revenue
		program earnings	\$	Service Center File with Form 1096.
Street address (including apt. no.)		7 Agriculture payments \$	8 The amount in box 2 applies to income from a trade or business ►	For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code		-		Notice, see the 2000 General Instructions for
Account number (optional)				Forms 1099, 1098, 5498, and W-2G.

Exhibit J

9292	VOID	CORRE	CTED			
PAYER'S name, street address, city, s			Payer's RTN (optional)	OMB No. 1545-0112]	
				2000	Inte	erest Income
				- 4000 INIT		
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	1 Interest income not included	Form 1099-INT		Сору А
			\$			For
RECIPIENT'S name			2 Early withdrawal penalty	3 Interest on U.S. Sav Bonds and Treas. of		Internal Revenue Service Center
			\$	\$		File with Form 1096.
Street address (including apt. no.)			4 Federal income tax withheld	5 Investment expens	es	For Privacy Act and Paperwork
City, state, and ZIP code			6 Foreign tax paid	7 Foreign country or	115	Reduction Act Notice, see the
				possession	0.0.	2000 General Instructions for
Account number (optional)		2nd TIN Not.				Forms 1099, 1098,
•2.80"			\$	4.15"		5498, and W-2
			āt. No. 14410K	·	,	Internal Revenue Service
Do NOT Cut or Separate	e Forms on Th	nis Page	— Do NOT Cut	or Separate	Forms	s on This Page
9292				1		
PAYER'S name, street address, city, s	state, ZIP code, and tele	ephone no.	Payer's RTN (optional)	OMB No. 1545-0112		
				തെന		
				2000	Inte	erest Income
				Form 1099-INT		
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	1 Interest income not included			Сору А
			\$	1		For
RECIPIENT'S name			2 Early withdrawal penalty	3 Interest on U.S. Sav Bonds and Treas. of		Internal Revenue Service Center
			\$	\$		File with Form 1096.
Street address (including apt. no.)			4 Federal income tax withheld	5 Investment expens	ies	For Privacy Act and Paperwork
City, state, and ZIP code			6 Foreign tax paid	Foreign country or	U.S.	Reduction Act Notice, see the
, ,				possession		2000 General Instructions for
Account number (optional)		2nd TIN Not.				Forms 1099, 1098,
orm 1099-INT			\$ at. No. 14410K	Department of the T		5498, and W-2G.
					reasury -	Internal nevenue Service
9292			CTED	or Separate		s on This Page
-						
9292			CTED	OMB No. 1545-0112	Forms	s on This Page
9292			CTED	or Separate	Forms	s on This Page
9292			CTED	or Separate	Forms	s on This Page
9292 PAYER'S name, street address, city, s		CORRE	CTED Payer's RTN (optional) 1 Interest income not included	or Separate	Forms	s on This Page erest Income
9292 PAYER'S name, street address, city, s PAYER'S Federal identification number	VOID State, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included	or Separate	Forms	s on This Page erest Income
9292 PAYER'S name, street address, city, s PAYER'S Federal identification number	VOID State, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included	or Separate	Forms	s on This Page erest Income Copy A For Internal Revenue
9292 PAYER'S name, street address, city, s PAYER'S Federal identification number	VOID state, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included	or Separate	Forms	s on This Page erest Income Copy A For Internal Revenue Service Center File with Form 1096.
9292 PAYER'S name, street address, city, s PAYER'S Federal identification number	VOID state, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included \$ 2 Early withdrawal penalty \$ 4 Federal income tax withheld	or Separate OMB No. 1545-0112 20000 Form 1099-INT d in box 3 3 Interest on U.S. Sav Bonds and Treas. of \$ 5 Investment expense	Forms	s on This Page erest Income Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork
9292 PAYER'S name, street address, city, s PAYER'S Federal identification number RECIPIENT'S name	VOID state, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included \$ 2 Early withdrawal penalty \$	or Separate	Forms	
P292 PAYER'S name, street address, city, s PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.)	VOID state, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included \$ 2 Early withdrawal penalty \$ 4 Federal income tax withheld \$ 6 Foreign tax paid	or Separate OMB No. 1545-0112 20000 Form 1099-INT d in box 3 3 Interest on U.S. Sav Bonds and Treas. of \$ 5 Investment expens \$	Forms	erest Income Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act
PAYER'S name, street address, city, s PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.)	VOID state, ZIP code, and tele	CORRE	CTED Payer's RTN (optional) 1 Interest income not included \$ 2 Early withdrawal penalty \$ 4 Federal income tax withheld \$ 6 Foreign tax paid	or Separate OMB No. 1545-0112 20000 Form 1099-INT d in box 3 3 Interest on U.S. Sav Bonds and Treas. of \$ 5 Investment expens \$ 7 Foreign country or	Forms	s on This Page erest Income For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General

Exhibit K

9393		CTED 4.50)"	
PAYER'S name, street address, city,	state, ZIP code, and telephone no.	1 Gross long-term care benefits paid	OMB No. 1545-1519	
		\$		Long-Term Care and
		2 Accelerated death	2000	Accelerated Death
		benefits paid		Benefits
	Ι	\$	Form 1099-LTC	I
PAYER'S Federal identification number	POLICYHOLDER'S identification number	Per Reimbursed	INSURED'S social secur	
POLICYHOLDER'S name		INSURED'S name	1.40	For Internal Revenue
€	3.40"	•		Service Center
				File with Form 1096. For Privacy Act
Street address (including apt. no.)		Street address (including apt	,	and Paperwork
City, state, and ZIP code		City, state, and ZIP code		Reduction Act Notice, see the
				2000 General
Account number (optional)		4 (optional) Chronically II	Terminally Date certified	Forms 1099, 1098,
orm 1099-LTC	Ca	at. No. 23021Z	Department of the Tre	asury - Internal Revenue Service
Do NOT Cut or Separa	te Forms on This Page		or Separate F	orms on This Page
PAYER'S name, street address, city,	state, ZIP code, and telephone no.	1 Gross long-term care benefits paid	OMB No. 1545-1519	
		 \$ 2 Accelerated death benefits paid 	2000	Long-Term Care and Accelerated Death Benefits
		\$	Form 1099-LTC	Denents
PAYER'S Federal identification number	POLICYHOLDER'S identification number	3 Check one:	INSURED'S social secur	ity no. Copy A
		Per Reimbursed amount		For
POLICYHOLDER'S name		INSURED'S name		Internal Revenue Service Center
~				File with Form 1096. For Privacy Act
Street address (including apt. no.)		Street address (including apt	. no.)	and Paperwork
City, state, and ZIP code		City, state, and ZIP code		Reduction Act Notice, see the 2000 General
Account number (optional)		4 Chronically (optional) II	Terminally Date certified	Instructions for Forms 1099, 1098, 5498, and W-2G.
Form 1099-LTC	C	at. No. 23021Z	Department of the Tre	asury - Internal Revenue Service
Do NOT Cut or Separa 9393 PAYER'S name, street address, city,	te Forms on This Page		OMB No. 1545-1519	orms on This Page
		\$		Long-Term Care and
		 φ 2 Accelerated death benefits paid 	2000	Accelerated Death
		\$	Form 1099-LTC	Benefits
PAYER'S Federal identification number	POLICYHOLDER'S identification number		INSURED'S social secur	
POLICYHOLDER'S name	I	INSURED'S name		For Internal Revenue Service Center
Street address (including apt. no.)		Street address (including apt	. no.)	File with Form 1096. For Privacy Act and Paperwork
City, state, and ZIP code		City, state, and ZIP code		Reduction Act Notice, see the 2000 General
				Instructions for
Account number (optional)		4 (optional) Chronically III	Terminally ill Date certified	Forms 1099, 1098, 5498, and W-2G.

Exhibit L

			CTED		
PAYER'S name, street address, city,	state, ZIP code, and tele	ephone no.	1 Rents	OMB No. 1545-0115	
			 Φ 2 Royalties 		Miscellaneous
			\$	2000	Income
			3 Other income		
			\$	Form 1099-MISC	
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	4 Federal income tax withheld \$	5 Fishing boat proceed	ds Copy A
RECIPIENT'S name	<u> </u>		 Description Medical and health care payment 	\$ s 7 Nonemployee comper	Isation Internal Revenue
			\$	\$	Service Center
			8 Substitute payments in lieu of	9 Payer made direct sale	
Street address (including apt. no.)			dividends or interest	\$5,000 or more of con products to a buyer	sumer For Privacy Ac and Paperworl
			\$	(recipient) for resale	Reduction Ac
City, state, and ZIP code			10 Crop insurance proceeds	11 State income tax wit	hheld Notice, see the 2000 Genera
ccount number (optional)		2nd TIN Not	Φ 12 State/Payer's state number		Instructions fo
2.80"===				4.15"	Forms 1099, 1098
orm 1099-MISC			at. No. 14425J	Deportment of the Tre	asury - Internal Revenue Service
9595 PAYER'S name, street address, city,	state, ZIP code, and tele	CORRE	1 Rents \$ 2 Royalties	OMB No. 1545-0115	Miscellaneous
			\$		Income
			3 Other income		
			\$	Form 1099-MISC	
AYER'S Federal identification number	RECIPIENT'S identifica	ation number	4 Federal income tax withheld \$	5 Fishing boat proceed \$	ds Copy A Fo
RECIPIENT'S name			6 Medical and health care payment \$	s 7 Nonemployee comper \$	
			8 Substitute payments in lieu of dividends or interest	9 Payer made direct sale: \$5,000 or more of con	
Street address (including apt. no.)				products to a buyer	and Paperwork
City, state, and ZIP code			 Φ 10 Crop insurance proceeds 	(recipient) for resale ► 11 State income tax wit	
,,,			\$	\$	2000 Genera
Account number (optional)		2nd TIN Not.	12 State/Payer's state number		Instructions fo Forms 1099, 1098
				\$	5498, and W-2G
orm 1099-MISC		0			
		U Ca	at. No. 14425J	Department of the Tre	asury - Internal Revenue Servic
-		his Page	— Do NOT Cu		•
9595		his Page	— Do NOT Cu		
9595		his Page	- Do NOT Cu	t or Separate I	Forms on This Page
9595		his Page	— Do NOT Cu CTED 1 Rents 2 Royalties	OMB No. 1545-0115	Forms on This Page Miscellaneous
9595		his Page	— Do NOT Cu CTED 1 Rents 2 Royalties	t or Separate I	Forms on This Page Miscellaneous
9595		his Page	 — Do NOT Cu CTED 1 Rents \$ 2 Royalties \$ 3 Other income 	t or Separate F	Forms on This Page Miscellaneous
9595 AYER'S name, street address, city,	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents \$ 2 Royalties \$ 3 Other income \$ 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC	Forms on This Page Miscellaneous Income
9595 AYER'S name, street address, city,		his Page	 — Do NOT Cu CTED 1 Rents \$ 2 Royalties \$ 3 Other income 	t or Separate F	Forms on This Page Miscellaneous Income
9595 PAYER'S name, street address, city, PAYER'S Federal identification number	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 4 Federal income tax withheld 6 Medical and health care payment 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 7 Nonemployee comper	Forms on This Page Miscellaneous Income ds Copy A Fo Internal Revenue
9595 PAYER'S name, street address, city, PAYER'S Federal identification number	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 3 Other income 4 Federal income tax withheld 6 Medical and health care payment 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 7 Nonemployee comper \$	Miscellaneous Income Income Internal Revenue Service Cente
9595 PAYER'S name, street address, city, PAYER'S Federal identification number RECIPIENT'S name	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 4 Federal income tax withheld 6 Medical and health care payment 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 5 7 Nonemployee comper \$ 9 Payer made direct sale: \$5,000 or more of con	Forms on This Page Miscellaneous Income ds Copy A Insation Internal Revenue Service Cente s of
9595 PAYER'S name, street address, city, PAYER'S Federal identification number RECIPIENT'S name	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 3 Other income tax withheld 4 Federal income tax withheld 6 Medical and health care payment 8 Substitute payments in lieu of dividends or interest 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 7 Nonemployee comper \$ 9 Payer made direct sale: \$5,000 or more of con products to a buyer	A sof sumer Sof Sof Sumer Sof
9595 PAYER'S name, street address, city, PAYER'S Federal identification number RECIPIENT'S name	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 3 Other income tax withheld 4 Federal income tax withheld 6 Medical and health care payment 8 Substitute payments in lieu of 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 5 7 Nonemployee comper \$ 9 Payer made direct sale: \$5,000 or more of con	Arrow Sort Copy A Sation Sof Sumer
9595 PAYER'S name, street address, city, PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.)	VOID state, ZIP code, and tele	his Page	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 3 Other income tax withheld 4 Federal income tax withheld 6 Medical and health care payment 8 Substitute payments in lieu of dividends or interest 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 5 Nonemployee comper \$ 9 Payer made direct sale \$5,000 or more of con products to a buyer (recipient) for resale	A copy A for a constant of the service Center of sumer sof sumer the service center of t
PAYER'S Federal identification number RECIPIENT'S name Street address (including apt. no.) City, state, and ZIP code	VOID state, ZIP code, and tele	tion number	 — Do NOT Cu CTED 1 Rents 2 Royalties 3 Other income 3 Other income tax withheld 4 Federal income tax withheld 6 Medical and health care payment 8 Substitute payments in lieu of dividends or interest 8 Substitute payments in lieu of dividends or interest 10 Crop insurance proceeds 	t or Separate F OMB No. 1545-0115 20000 Form 1099-MISC 5 Fishing boat proceed \$ 5 7 Nonemployee comper \$ 9 Payer made direct sale \$5,000 or more of con products to a buyer (recipient) for resale ► 11 State income tax wit \$	s of sumer

Exhibit M

9494		ECTED		
PAYER'S name, street address, city,	state, and ZIP code		OMB No. 1545-1517	Distributions From an MSA or Medicare+Choice MSA
PAYER'S Federal identification number	RECIPIENT'S identification number	1 Gross distribution	Form 1099-MSA 2 Earnings on excess contributions 1.40"	Copy A For
RECIPIENT'S name	3.40"	3 Distribution code	4 FMV on date of dea	Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)	0.10	5 Medicare+Choice MSA	\$	For Privacy Act and Paperwork
City, state, and ZIP code			—] — 3.90" — — — — — — — — — — — — — — — — — — —	Reduction Act Notice, see the 2000 General
Account number (optional)			3.90°	Instructions for Forms 1099, 1098, 5498, and W-2G.
Form 1099-MSA Do NOT Cut or Separat 9494 PAYER'S name, street address, city,	e Forms on This Page		·	
			20 00 Form 1099-MSA	Distributions From an MSA or Medicare+Choice MSA
PAYER'S Federal identification number	RECIPIENT'S identification number	1 Gross distribution	2 Earnings on excess contributions	Обру А
RECIPIENT'S name		\$ 3 Distribution code	\$ 4 FMV on date of dea	th For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)		5 Medicare+Choice MSA	\$	For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code Account number (optional)		-		Notice, see the 2000 General Instructions for Forms 1099, 1098,
Form 1099-MSA	с	at. No. 23114L	Department of the Trea	5498, and W-2G. asury - Internal Revenue Service
Do NOT Cut or Separat 9494 PAYER'S name, street address, city,			Cut or Separate F	orms on This Page Distributions From an MSA or Medicare+Choice MSA
PAYER'S Federal identification number	RECIPIENT'S identification number	1 Gross distribution	2 Earnings on excess contributions	оору д
RECIPIENT'S name		\$ 3 Distribution code	\$ 4 FMV on date of dea	Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)		5 Medicare+Choice MSA		For Privacy Act and Paperwork
City, state, and ZIP code			<u> </u>	Reduction Act Notice, see the 2000 General Instructions for
Account number (optional)]		Forms 1099, 1098, 5498, and W-2G.

Exhibit N

9696			CTED		
PAYER'S name, street address, city,	state, ZIP code, and tele	ephone no.	1 Original issue discount for 2000	OMB No. 1545-0117	
			\$ 1.40"		Original Issue
			2 Other periodic interest	- 2000	Discount
			\$	Form 1099-OID	
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	3 Early withdrawal penalty	4 Federal income tax withheld	Сору А
RECIPIENT'S name			\$ 5 Description	\$	For Internal Revenue
					Service Center File with Form 1096.
Street address (including apt. no.)	treet address (including apt. no.)			U.S. Treasury obligations	For Privacy Act and Paperwork Reduction Act Notice, see the
City, state, and ZIP code	and ZIP code				2000 General Instructions for Forms 1099, 1098,
Account number (optional)		2nd TIN Not		4.15"	5498, and W-2G.
← 2.80" ==			at. No. 14421R	Department of the Treasury -	
Do NOT Cut or Separat			CTED 1 Original issue discount	t or Separate Form OMB No. 1545-0117	s on This Page
			for 2000		
			\$ 2 Other periodic interest	2000	Original Issue Discount
			\$	Form 1099-OID	
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	3 Early withdrawal penalty	4 Federal income tax withheld	Сору А
RECIPIENT'S name			\$ 5 Description	\$	For Internal Revenue
NEOFFIENT S Hame			Description		Service Center File with Form 1096.
Street address (including apt. no.)			6 Original issue discount on U.S. Treasury obligations		For Privacy Act and Paperwork Reduction Act Notice, see the
City, state, and ZIP code			7 Investment expenses \$		2000 General Instructions for
Account number (optional)		2nd TIN Not	*		Forms 1099, 1098, 5498, and W-2G.
Form 1099-OID Do NOT Cut or Separat 		his Page		Department of the Treasury - t or Separate Form OMB No. 1545-0117	
			\$ 2 Other periodic interest	- 2000	Original Issue Discount
PAYER'S Federal identification number	RECIPIENT'S identifica	ation number	\$3 Early withdrawal penalty	Form 1099-OID 4 Federal income tax withheld	Conv
			3 Early withdrawal penalty \$	Federal Income tax withheid \$	Copy A
RECIPIENT'S name			5 Description		Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)			6 Original issue discount on §	U.S. Treasury obligations	For Privacy Act and Paperwork Reduction Act Notice, see the
City, state, and ZIP code			7 Investment expenses \$		2000 General Instructions for
Account number (optional)		2nd TIN Not	•		Forms 1099, 1098, 5498, and W-2G.
Form 1099-OID			at. No. 14421R	Department of the Treasury -	

Exhibit O

9797			ECTED		
PAYER'S name, street address, city,			1 Patronage dividends	OMB No. 1545-0118	Taxable
			2 Nonpatronage distributions		Distributions
			\$3 Per-unit retain allocations		Received From Cooperatives
			\$	Form 1099-PATR	Coporation
PAYER'S Federal identification number	RECIPIENT'S identifica	tion number	4 Federal income tax withheld \$		Copy A For
RECIPIENT'S name			5 Redemption of nonqualified notices and retain allocations		Internal Revenue Service Center
			\$		File with Form 1096.
Street address (including apt. no.)			6 \$	7 Investment credit \$	For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code			8 Work opportunity credit	9 Patron's AMT adjustment	Notice, see the 2000 General
Account number (optional)		2nd TIN Not.		Ψ	Instructions for Forms 1099, 1098,
2.80"				4.15"	5498, and W-2
9797 PAYER'S name, street address, city,	VOID state, ZIP code, and tele	CORRE	1 Patronage dividends	OMB No. 1545-0118	Taxable
			 \$ 2 Nonpatronage distributions \$ 3 Per-unit retain allocations 	2000	Distributions Received From Cooperatives
			\$	Form 1099-PATR	
PAYER'S Federal identification number	RECIPIENT'S identifica	tion number	4 Federal income tax withheld \$		Copy A For
RECIPIENT'S name			 5 Redemption of nonqualified notices and retain allocations \$ 		Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)			6 \$	7 Investment credit	For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code			8 Work opportunity credit	9 Patron's AMT adjustment	Notice, see the 2000 General Instructions for
Account number (optional)		2nd TIN Not.			Forms 1099, 1098, 5498, and W-2G.
Form 1099-PATR Do NOT Cut or Separat 9797	te Forms on Ti			Department of the Treasury t or Separate Form	
PAYER'S name, street address, city,			1 Patronage dividends	OMB No. 1545-0118	
			 \$ 2 Nonpatronage distributions 	2000	Taxable Distributions Received From
			 \$ 3 Per-unit retain allocations 		Cooperatives
PAYER'S Federal identification number	RECIPIENT'S identifica	tion number	 \$ 4 Federal income tax withheld ¢ 	Form 1099-PATR	Сору А
RECIPIENT'S name	<u> </u>		 \$ 5 Redemption of nonqualified notices and retain allocations 		For Internal Revenue Service Center
					File with Form 1096.
Street address (including apt. no.)			\$ 6	7 Investment credit	File with Form 1096. For Privacy Act and Paperwork
Street address (including apt. no.) City, state, and ZIP code				7 Investment credit 9 Patron's AMT adjustment \$	For Privacy Act

Exhibit P

	9898 PAYER'S name, street address,	city, state, and ZIP code	_	<u>ED</u> Gross distribut	tion	OMB No. 1545-0119] [Distributions From
			-	1.40"=			Pe	nsions, Annuities, Retirement or
50" 			\$ 2a	a Taxable amou	nt	2000		Profit-Sharing Plans, IRAs,
			\$			Form 1099-R		Insurance Contracts, etc.
	4.50" II			n Taxable amou	nt	Total	 ●	1.25" Copy R
				not determined		= 2.65" distribution		For
	PAYER'S Federal identification number	RECIPIENT'S identification number	3	Capital gain (ir in box 2a)	ncluded	4 Federal income withheld	tax	Internal Revenue Service Center
			\$			\$		File with Form 1096.
	RECIPIENT'S name		5	Employee contr or insurance pro		6 Net unrealized appreciation in employer's sec	urities	For Privacy Act and Paperwork Reduction Act
			\$.40"	\$		Notice, see the
	Street address (including apt. no).)	7	Distribution code 1.00 ^r	IRA/ SEP/ SIMPLE	8 Other ◀ 1.00 ⁺ ● ◀ 2.50 ⁺ ●	.40" •	2000 General Instructions for Forms 1099.
	City, state, and ZIP code		9a	Your percentage distribution	of total %	9b Total employee cont \$	tributions	1098, 5498, and W-2G.
	Account number (optional)		10	State tax withh		11 State/Payer's s	tate no.	12 State distribution
			\$					€ 1.10" →
			13	Local tax withh	eld	14 Name of locality	v	5 15 Local distribution
			\$				у	\$
	Form 1099-R ♠		\$					\$
Ŧ	9898 ▼ PAYER'S name, street address,	VOID CORR		ED Gross distribut	tion	OMB No. 1545-0119	-	Distributions From Insions, Annuities, Retirement or
				a Taxable amou	nt	2000		Profit-Sharing Plans, IRAs,
						- 1000 B		Insurance
			\$	Taxable amou	ot.	Form 1099-R Total		Contracts, etc. Copy A
			20	not determined		distributior	n 🗌	For
	PAYER'S Federal identification number	RECIPIENT'S identification number	3	Capital gain (ir in box 2a)	ncluded	4 Federal income withheld	tax	Internal Revenue Service Center
			\$			\$		File with Form 1096.
	RECIPIENT'S name		5	Employee contr or insurance pro		 6 Net unrealized appreciation in employer's sec 	urities	For Privacy Act and Paperwork Reduction Act
	Street address (including apt. no		<u>\$</u> 7	Distribution code	IRA/ SEP/ SIMPLE	\$ 8 Other		Notice, see the 2000 General Instructions for
	City, state, and ZIP code).)				\$ 9b Total employee cont	tributions	Forms 1099,
).) 	9a	Your percentage distribution	of total %		libutions	
	Account number (optional)).) 	10	distribution	%	11 State/Payer's s		1098, 5498, and W-2G. 12 State distribution
	Account number (optional)).) 		distribution	%	\$		1098, 5498, and W-2G.
	Account number (optional)).) 	10 \$	distribution State tax withh	% eld	\$	tate no.	1098, 5498, and W-2G. 12 State distribution \$
	Account number (optional)).) 	10 \$ \$ 13	distribution State tax withh	% eld	\$ 11 State/Payer's s	tate no.	1098, 5498, and W-2G. 12 State distribution \$

Exhibit Q

	RECTED	
FILER'S name, street address, city, state, ZIP code, and telephone no.	1 Date of closing OMB No. 1545-0997	
		Proceeds From Real
		Estate Transactions
	\$ Form 1099-S	
FILER'S Federal identification number TRANSFEROR'S identification numb	er 3 Address or legal description (including city, state, and ZIP co	^{de)} Copy A
TRANSFEROR'S name		For Internal Revenue
	2.80"	Service Center
Street address (including apt. no.)		File with Form 1096. For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code	4 Check here if the transferor received or will receive property or services as part of the consideration.	Notice, see the 1.15'00 General
Account number (optional)	5 Buyer's part of real estate tax	Forms 1099, 1098, 5498, and W-2G.
Form 1099-S	Ť	/ - Internal Revenue Service
Do NOT Cut or Separate Forms on This Page 7575 VOID COR FILER'S name, street address, city, state, ZIP code, and telephone no.	ge — Do NOT Cut or Separate Forr RECTED 1 Date of closing OMB No. 1545-0997	ns on this Page
		Proceeds From Real Estate Transactions
	\$ Form 1099-S	
FILER'S Federal identification number TRANSFEROR'S identification numb	· · · · · · · · · · · · · · · · · · ·	de) Copy A
TRANSFEROR'S name		For Internal Revenue Service Center
Street address (including apt. no.)		File with Form 1096. For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code	4 Check here if the transferor received or will receive property or services as part of the consideration. ►	Notice, see the 2000 General
Account number (optional)	5 Buyer's part of real estate tax	 Instructions for Forms 1099, 1098, 5498, and W-2G.
Form 1099-S	Cat. No. 64292E Department of the Treasury	/ - Internal Revenue Service
Do NOT Cut or Separate Forms on This Page 7575 VOID COR FILER'S name, street address, city, state, ZIP code, and telephone no.	RECTED 1 Date of closing 0MB No. 1545-0997 00000 P	ns on This Page Proceeds From Real Estate Transactions
	\$ Form 1099-S	
FILER'S Federal identification number TRANSFEROR'S identification numb		de) Copy A
TRANSFEROR'S name		For Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)		For Privacy Act and Paperwork Reduction Act
City, state, and ZIP code	4 Check here if the transferor received or will receive property or services as part of the consideration. ►	Notice, see the 2000 General Instructions for
City, state, and ZIP code Account number (optional)		2000 General

Exhibit R

2828				
TRUSTEE'S or ISSUER'S name, stree		1 IRA contributions (other than amounts in boxes 2, 3, and 7–10) \$ 2 Rollover contributions ▲ 1.40"	OMB No. 1545-0747	IRA Contribution Information
TRUSTEE'S or ISSUER'S Federal identification no.	PARTICIPANT'S social security number		Form 5498	Сору А
PARTICIPANT'S name		\$4 Fair market value of account	5 Life insurance cost included in box 1	For Internal Revenue Service Center
Street address (including apt. no.)		\$ 6 IRA SEP SIMPLE F	Soth IRA Rechar. Ed IRA	and Paperwork
City, state, and ZIP code		7 SEP contributions	8 SIMPLE contributions	Reduction Act Notice, see the 2000 General
Account number (optional)		 9 Roth IRA contributions \$ 	10 Ed IRA contributions	Instructions for Forms 1099, 1098, 5498, and W-2G.
Form 5498 Do NOT Cut or Separat	دہ te Forms on This Page	at. No. 50010C	Department of the Treasury	- Internal Revenue Service
2828 TRUSTEE'S or ISSUER'S name, stree	VOID CORRE	1 IRA contributions (other than amounts in boxes 2, 3, and 7–10)	OMB No. 1545-0747	
		S, and 7–10) S 2 Rollover contributions	2000	IRA Contribution Information
TRUSTEE'S or ISSUER'S Federal identification no.	PARTICIPANT'S social security number		Form 5498	Сору А
PARTICIPANT'S name		 \$ 4 Fair market value of account \$ 	 5 Life insurance cost included in box 1 	Internal Revenue Service Center File with Form 1096.
Street address (including apt. no.)		6 IRA SEP SIMPLE F	Roth IRA Rechar. Ed IRA	Reduction Act
City, state, and ZIP code		7 SEP contributions \$	8 SIMPLE contributions	Notice, see the 2000 General Instructions for
Account number (optional)		9 Roth IRA contributions	10 Ed IRA contributions \$	Forms 1099, 1098, 5498, and W-2G.
Form 5498 Do NOT Cut or Separat	دء te Forms on This Page	at. No. 50010C — Do NOT Cut	Department of the Treasury	
2828 TRUSTEE'S or ISSUER'S name, stree	VOID CORRE	 IRA contributions (other than amounts in boxes 2, 3, and 7–10) Rollover contributions 	OMB No. 1545-0747	IRA
TRUSTEE'S or ISSUER'S name, stree		 1 IRA contributions (other than amounts in boxes 2, 3, and 7–10) 2 Rollover contributions \$ 3 Roth conversion amount 		IRA Contribution Information Copy A
TRUSTEE'S or ISSUER'S name, stree	et address, city, state, and ZIP code	 1 IRA contributions (other than amounts in boxes 2, 3, and 7–10) 2 Rollover contributions 3 Roth conversion amount 4 Fair market value of account 	2000 Form 5498	IRA Contribution Information Copy A
TRUSTEE'S or ISSUER'S name, stree TRUSTEE'S or ISSUER'S Federal identification no. PARTICIPANT'S name Street address (including apt. no.)	et address, city, state, and ZIP code	1 IRA contributions (other than amounts in boxes 2, 3, and 7–10) \$ 2 2 Rollover contributions \$ 3 3 Roth conversion amount \$ 4 4 Fair market value of account \$ 6 1 IRA SEP SIMPLE	2000 Form 5498 5 Life insurance cost included in box 1 \$ Roth IRA Rechar. Ed IRA	IRA Contribution Information Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act
TRUSTEE'S or ISSUER'S name, stree TRUSTEE'S or ISSUER'S Federal identification no. PARTICIPANT'S name	et address, city, state, and ZIP code	 IRA contributions (other than amounts in boxes 2, 3, and 7–10) Rollover contributions Roth conversion amount Fair market value of account 	2000 Form 5498	IRA Contribution Information Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act

Exhibit S

TRUSTEE'S name, street address, cit		1 Employee or self-employed	OMB No. 1545-1518	
	y, state, and zin code	person's MSA contributions made in 2000 and 2001 for 2000		MSA or
		\$		Medicare+Choice
		2 Total contributions made	- 2000	MSA Information
		in 2000 ◀━━━━━=1.40"━━━━		
		\$	Form 5498-MSA	1
TRUSTEE'S Federal identification number	PARTICIPANT'S social security numb		ade in 2001 for 2000	Сору А
PARTICIPANT'S name		\$ 4 Rollover contributions	5 Fair market value of MS	For A or Internal Revenue
			M+C MSA	Service Center
3	.40"	▶ \$	\$	File with Form 1096.
Street address (including apt. no.)		6 Medicare+Choice		For Privacy Act and Paperwork
		MSA		Reduction Act
City, state, and ZIP code				Notice, see the 2000 General
Account number (optional)		_		Instructions for
				Forms 1099, 1098, 5498, and W-2G.
orm 5498-MSA		Cat. No. 23097L	Department of the Treat	sury - Internal Revenue Service
				2
Do NOT Cut or Separat	e Forms on This Pag	e — Do NOT Cu	t or Separate Fo	orms on this Page
2727		RECTED		
TRUSTEE'S name, street address, cit		1 Employee or self-employed	OMB No. 1545-1518	MSA or
		person's MSA contributions made in 2000 and 2001 for 2000		Medicare+Choice
		\$	- 2000	MSA Information
		2 Total contributions made in 2000		
		\$	Form 5498-MSA	
TRUSTEE'S Federal identification number	PARTICIPANT'S social security numb			Сору А
	-	\$		For
PARTICIPANT'S name		4 Rollover contributions	5 Fair market value of MS/ M+C MSA	A or Internal Revenue
				Service Center File with Form 1096.
		\$ 6 Medicare+Choice	\$	For Privacy Act
Street address (including apt. no.)				and Paperwork
City, state, and ZIP code				Reduction Act Notice, see the
				2000 General Instructions for
Account number (optional)				Forms 1099, 1098,
				5498, and W-2G.
orm 5498-MSA		Cat. No. 23097L	Department of the Treas	sury - Internal Revenue Service
Do NOT Cut or Separat	e Forms on This Pag	e — Do NOT Cu	t or Senarate Fo	orms on This Page
			t of ocparate re	
2727		ECTED		
2727 TRUSTEE'S name, street address, cit		RECTED	OMB No. 1545-1518	
		1 Employee or self-employed person's MSA contributions made	OMB No. 1545-1518	
		1 Employee or self-employed		Medicare+Choice
		1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 \$ 2 Total contributions made		Medicare+Choice
		 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 Total contributions made in 2000 	2000	Medicare+Choice
TRUSTEE'S name, street address, cit	y, state, and ZIP code	 1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 2 Total contributions made in 2000 \$ 	- 20 00 Form 5498-MSA	Medicare+Choice MSA Information
TRUSTEE'S name, street address, cit		1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 \$ 2 Total contributions made in 2000 \$ oper 3 Total MSA contributions made	- 20 00 Form 5498-MSA	Medicare+Choice MSA Information Copy A
TRUSTEE'S name, street address, cit	y, state, and ZIP code	Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 S Total contributions made in 2000 S Total MSA contributions mate S	20 00 Form 5498-MSA ade in 2001 for 2000	Medicare+Choice MSA Information Copy A
TRUSTEE'S name, street address, cit	y, state, and ZIP code	1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 \$ 2 Total contributions made in 2000 \$ oper 3 Total MSA contributions made	- 20 00 Form 5498-MSA	Medicare+Choice MSA Information Copy A For Internal Revenue
TRUSTEE'S name, street address, cit	y, state, and ZIP code	Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 S Total contributions made in 2000 S Total MSA contributions mate S	Form 5498-MSA ade in 2001 for 2000	Medicare+Choice MSA Information Copy A For Internal Revenue Service Center File with Form 1096.
TRUSTEE'S name, street address, cit TRUSTEE'S Federal identification number PARTICIPANT'S name	y, state, and ZIP code	Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 S Z Total contributions made in 2000 S Total MSA contributions mate A Rollover contributions S G Medicare+Choice	Form 5498-MSA ade in 2001 for 2000 5 Fair market value of MSA	Medicare+Choice MSA Information Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act
TRUSTEE'S name, street address, cit TRUSTEE'S Federal identification number PARTICIPANT'S name Street address (including apt. no.)	y, state, and ZIP code	Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 S Z Total contributions made in 2000 S Total MSA contributions mat S 4 Rollover contributions	Form 5498-MSA ade in 2001 for 2000 5 Fair market value of MSA	Medicare+Choice MSA Information
TRUSTEE'S name, street address, cit TRUSTEE'S Federal identification number PARTICIPANT'S name Street address (including apt. no.)	y, state, and ZIP code	1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 2 Total contributions made in 2000 \$ 3 oper 3 4 Rollover contributions \$ 6 6 Medicare+Choice	Form 5498-MSA ade in 2001 for 2000 5 Fair market value of MSA	Medicare+Choice MSA Information
TRUSTEE'S name, street address, cit TRUSTEE'S Federal identification number PARTICIPANT'S name Street address (including apt. no.) City, state, and ZIP code	y, state, and ZIP code	1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 2 Total contributions made in 2000 \$ 3 oper 3 4 Rollover contributions \$ 6 6 Medicare+Choice	Form 5498-MSA ade in 2001 for 2000 5 Fair market value of MSA	Medicare+Choice MSA Information A or A or File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General Instructions for
TRUSTEE'S name, street address, cit TRUSTEE'S Federal identification number PARTICIPANT'S name Street address (including apt. no.)	y, state, and ZIP code	1 Employee or self-employed person's MSA contributions made in 2000 and 2001 for 2000 2 Total contributions made in 2000 \$ 3 oper 3 4 Rollover contributions \$ 6 6 Medicare+Choice	Form 5498-MSA ade in 2001 for 2000 5 Fair market value of MSA	MSA Information Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2000 General

Exhibit T

3232	CORRECTED		
PAYER'S name	1 Gross winnings	2 Federal income tax withheld	OMB No. 1545-0238
	1.45"	1.45"	2000
Street address 3.00"	3 Type of wager	4 Date won	
City, state, and ZIP code	5 Transaction	6 Race	Form W-2G Certain
Federal identification number Telephone number	7 Winnings from identical wagers	8 Cashier	Gambling Winnings
WINNER'S name 2.85"	9 Winner's taxpayer identification no.	10 Window	For Privacy Act and Paperwork Reduction Act
Street address (including apt. no.)	11 First I.D.	12 Second I.D.	Notice, see the 2000 General Instructions for Forms 1099, 1098, 5498
City, state, and ZIP code	13 State/Payer's state identification no.	14 State income tax withheld	and W-2G.
Under penalties of perjury, I declare that, to the best of my knowledge an	d halief the name address and taxnaver ide	tification number that I have furnished	File with Form 1096.
correctly identify me as the recipient of this payment and any payments fro			Copy A For Internal Revenue
Signature ► ₩	Γ)ate ►	Service Center
3232	CORRECTED	2 Federal income tax withheld	OMB No. 1545-0238
Street address	3 Type of wager	4 Date won	2000
City, state, and ZIP code	5 Transaction	6 Race	Form W-2G
Federal identification number Telephone number	7 Winnings from identical wagers	8 Cashier	Certain Gambling
			Winnings
WINNER'S name	9 Winner's taxpayer identification no.	10 Window	For Privacy Act and Paperwork Reduction Act Notice, see the 2000
Street address (including apt. no.)	11 First I.D.	12 Second I.D.	General Instructions for Forms 1099, 1098, 5498, and W-2G.
City, state, and ZIP code	13 State/Payer's state identification no.	14 State income tax withheld	File with Form 1096.
Under penalties of perjury, I declare that, to the best of my knowledge an correctly identify me as the recipient of this payment and any payments fro Signature ►	m identical wagers, and that no other person is		Copy A For Internal Revenue Service Center
form W-2G	- Cat. No. 10138V		asury - Internal Revenue Service
3232	CORRECTED	2 Federal income tax withheld	OMB No. 1545-0238
			2000
Street address	3 Type of wager	4 Date won	Form W-2G
City, state, and ZIP code	5 Transaction	6 Race	Certain
Federal identification number Telephone number	7 Winnings from identical wagers	8 Cashier	Gambling Winnings
WINNER'S name	9 Winner's taxpayer identification no.	10 Window	For Privacy Act and Paperwork Reduction Act
Street address (including apt. no.)	11 First I.D.	12 Second I.D.	Notice, see the 2000 General Instructions for

Forms 1099, 1098, 5498, and W-2G. File with Form 1096.

Copy A For Internal Revenue Service Center

City, state, and ZIP code

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.

13 State/Payer's state identification no.

14 State income tax withheld

Date ►