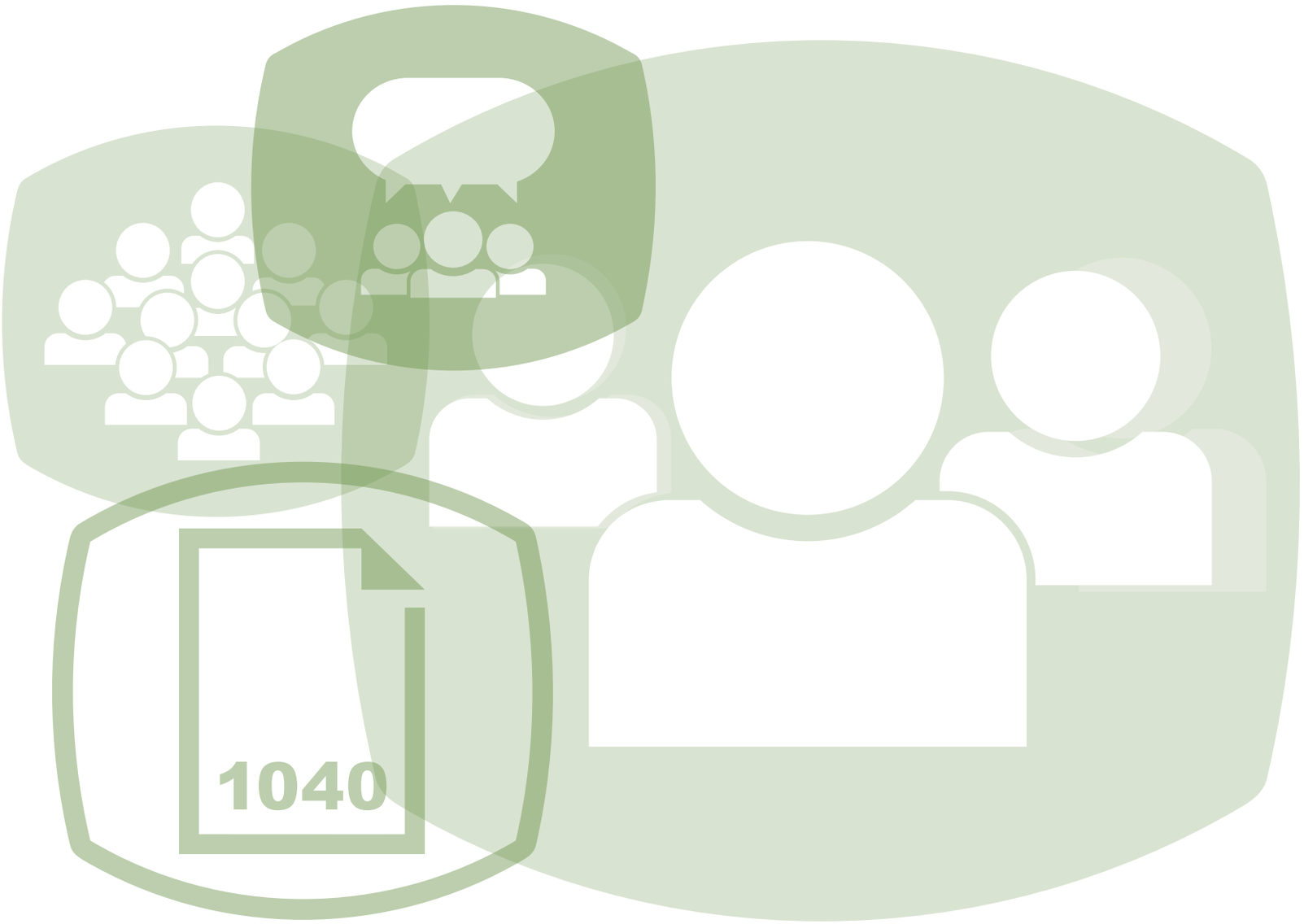
Statistics of Income

Individual Information Returns
Line Item Estimates

2018



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Department
of the
Treasury
**Internal
Revenue
Service**

2018 Individual Information Returns, Line Item Estimates

(Rev. 11-2021)

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This 2018 Statistics of Income (SOI) Information Returns, line item estimates publication provides estimates of frequencies and amounts of the entries on the lines of the forms filed for selected information returns that accompany the 2018 Individual SOI complete report weighted file. The estimates presented here are based on returns filed in Processing Year 2019 that were sampled statistically and then weighted to estimate the entire 2018 Tax Year.

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

Suggested Citation

Statistics of Income--2018
Individual Information Returns
Line Item Estimates
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Description of the Sample for the Line Item Estimates

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

Domain of Study

The statistics in this report are estimates from a probability sample of Individual Information Returns, filed by third parties about certain business and money transactions on behalf of U.S. citizens and residents selected for inclusion in the sample of unaudited Individual Income Tax Returns, Form 1040 (including electronic returns) filed during Calendar year 2019, being reported as a dependent on a selected Tax Return, or if the citizen or resident for which the information return was filed possesses certain combinations of the four ending digits of the social security number (SSN) but no Tax Return was filed. To avoid double counting, information returns associated with dependent tax returns were excluded because they were instead included in association with their parents returns.

All tax returns processed during 2019 were subjected to sampling except tentative and amended returns. Tentative returns were not subjected to sampling because the revised returns may have been sampled later, while amended returns were excluded because the original returns had already been subjected to sampling. A small percentage of returns were not identified as tentative or amended until after sampling. These returns were excluded in the selection of the Information Returns sample and in calculating estimates.

The estimates in this report are intended to represent all Information Returns filed for Tax Year 2018. While most of the returns processed during Calendar Year 2019 were filed for Tax Year 2018, a small portion of returns were for prior years.

Sample Design and Selection

The portion of the sample covering those having filed a tax return is designed as a stratified probability sample, in which the population of tax returns is classified into subpopulations, called strata, and an independent sample is randomly selected from each stratum. Strata are defined by the following characteristics:

1. Nontaxable (including no alternative minimum tax) with adjusted gross income or expanded income of $200,000 or more.

2. High business receipts of $50,000,000 or more.

3. Presence or absence of special forms or schedules (Form 2555, Form 1116, Form 1040 Schedule C, and Form 1040 Schedule F).

4. Indexed positive or negative income. Sixty variables are used to derive positive and negative incomes. These positive and negative income classes are deflated using the Chain-Type Price Index for the Gross Domestic Product to represent a base year of 2016.

Tax data posted to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg

during Calendar Year 2019 were used to assign each taxpayer's record to the appropriate stratum and to determine whether the record should be included in the sample. Records are selected for the sample either if they possess certain combinations of the four ending digits of the social security number (SSN), or if their five ending digits of an eleven-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000.

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

Data Capture and Cleaning

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

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

Method of Estimation

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

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

Sampling Variability

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The standard error (SE) of an estimate is a measure of the variation among the estimates from the possible samples and, thus, is a measure of the precision with which an estimate from a particular sample approximates the average of the estimates calculated from all possible samples. Standard Errors are not provided for these estimates.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 2,513,951**	FILER'S TIN	OMB No. 1545-2205 2018 Form **1099-K**	**Payment Card and Third Party Network Transactions**
	PAYEE'S TIN		
	1a Gross amount of payment card/third party network transactions $ 213,468,323		
	1b Card Not Present transactions $ 54,952,041	**2** Merchant category code	**Copy B** **For Payee**
Check to indicate if FILER is a (an): Payment settlement entity (PSE) ☐ Electronic Payment Facilitator (EPF)/Other third party ☐ Check to indicate transactions reported are: Payment card ☐ Third party network ☐	**3** Number of payment transactions	**4** Federal income tax withheld $ 118,346	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
PAYEE'S name	**5a** January $ 31,777,328	**5b** February $ 20,361,736	
Street address (including apt. no.)	**5c** March $ 18,498,142	**5d** April $ 15,411,544	
	5e May $ 17,623,348	**5f** June $ 15,119,465	
City or town, state or province, country, and ZIP or foreign postal code	**5g** July $ 14,667,387	**5h** August $ 15,711,765	
	5i September $ 15,843,034	**5j** October $ 15,695,694	
PSE'S name and telephone number	**5k** November $ 15,310,960	**5l** December $ 17,442,914	
Account number (see instructions)	**6** State	**7** State identification no.	**8** State income tax withheld $ $

Form **1099-K** (Keep for your records) www.irs.gov/Form1099K Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	FILER'S TIN	OMB No. 1545-2205	**Payment Card and Third Party Network Transactions**
Total of all forms filed = 2,513,951	PAYEE'S TIN	**2018**	
	1a Gross amount of payment card/third party network transactions $ **2,406,384**	Form **1099-K**	
	1b Card Not Present transactions $ **1,283,213**	**2** Merchant category code	**Copy B** **For Payee**
Check to indicate if FILER is a (an): Payment settlement entity (PSE) ☐ Electronic Payment Facilitator (EPF)/Other third party ☐ — Check to indicate transactions reported are: Payment card ☐ Third party network ☐	**3** Number of payment transactions	**4** Federal income tax withheld $ **21,887**	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
PAYEE'S name	**5a** January $ **1,722,978**	**5b** February $ **1,737,636**	
Street address (including apt. no.)	**5c** March $ **1,796,998**	**5d** April $ **1,827,919**	
	5e May $ **1,861,717**	**5f** June $ **1,874,709**	
City or town, state or province, country, and ZIP or foreign postal code	**5g** July $ **1,848,405**	**5h** August $ **1,865,416**	
PSE'S name and telephone number	**5i** September $ **1,863,438**	**5j** October $ **1,872,596**	
	5k November $ **1,828,480**	**5l** December $ **1,778,879**	
Account number (see instructions)	**6** State	**7** State identification no.	**8** State income tax withheld $ / $

Form **1099-K** (Keep for your records) www.irs.gov/Form1099K Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 2,055,541**	FILER'S TIN	OMB No. 1545-2205 2018 Form **1099-K**	**Payment Card and Third Party Network Transactions**
	PAYEE'S TIN		
	1a Gross amount of payment card/third party network transactions $ **1,960,774**		
	1b Card Not Present transactions $ **1,076,587**	**2** Merchant category code	**Copy B** **For Payee**
Check to indicate if FILER is a (an): Payment settlement entity (PSE) ☐ Electronic Payment Facilitator (EPF)/Other third party ☐ Check to indicate transactions reported are: Payment card ☐ Third party network ☐	**3** Number of payment transactions	**4** Federal income tax withheld $ **18,205**	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
PAYEE'S name	**5a** January $ **1,534,219**	**5b** February $ **1,533,441**	
Street address (including apt. no.)	**5c** March $ **1,585,218**	**5d** April $ **1,621,815**	
	5e May $ **1,646,041**	**5f** June $ **1,658,066**	
City or town, state or province, country, and ZIP or foreign postal code	**5g** July $ **1,635,008**	**5h** August $ **1,643,119**	
PSE'S name and telephone number	**5i** September $ **1,642,248**	**5j** October $ **1,646,437**	
	5k November $ **1,616,027**	**5l** December $ **1,584,143**	
Account number (see instructions)	**6** State	**7** State identification no.	**8** State income tax withheld $ $

Form **1099-K** (Keep for your records) www.irs.gov/Form1099K Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

22222	a Employee's social security number	OMB No. 1545-0008		
b Employer identification number (EIN)		1 Wages, tips, other compensation 8,904,500,000	2 Federal income tax withheld 1,271,000,000	
c Employer's name, address, and ZIP code Total of all forms filed = 274,557,128		3 Social security wages 7,175,300,000	4 Social security tax withheld 447,858,208	
		5 Medicare wages and tips 9,193,600,000	6 Medicare tax withheld 144,133,317	
		7 Social security tips 51,275,237	8 Allocated tips 137,896	
d Control number		9 Verification code	10 Dependent care benefits 6,312,390	
e Employee's first name and initial Last name Suff.		11 Nonqualified plans	12a Code "C", "D" "E", "F"	332,556,863
		13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	12b Code "AA"	21,219,936
		14 Other	12c Code "DD"	692,810,015
			12d Code "W"	29,637,370
f Employee's address and ZIP code				

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** **Wage and Tax Statement** 2018 Department of the Treasury—Internal Revenue Service

Copy 1—For State, City, or Local Tax Department

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

22222	a Employee's social security number	OMB No. 1545-0008		
b Employer identification number (EIN)		1 Wages, tips, other compensation 273,253,900	2 Federal income tax withheld 232,560,739	
c Employer's name, address, and ZIP code Total of all forms filed = 274,557,128		3 Social security wages 260,734,492	4 Social security tax withheld 259,332,360	
		5 Medicare wages and tips 267,396,371	6 Medicare tax withheld 262,420,855	
		7 Social security tips 11,690,481	8 Allocated tips 83,625	
d Control number		9 Verification code	10 Dependent care benefits 2,105,896	
e Employee's first name and initial Last name Suff.		11 Nonqualified plans	12a Code "C", "D" "E", "F" 67,901,564	
		13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	12b Code "AA" 5,715,351	
		14 Other	12c Code "DD" 73,406,391	
			12d Code "W" 13,308,250	
f Employee's address and ZIP code				

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** **Wage and Tax Statement** 2018 Department of the Treasury—Internal Revenue Service

Copy 1—For State, City, or Local Tax Department

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

22222	a Employee's social security number	OMB No. 1545-0008		
b Employer identification number (EIN)		1 Wages, tips, other compensation 181,928,842	2 Federal income tax withheld 168,150,242	
c Employer's name, address, and ZIP code Total of all individuals represented = 182,345,722		3 Social security wages 174,603,481	4 Social security tax withheld 174,107,418	
		5 Medicare wages and tips 179,021,896	6 Medicare tax withheld 177,886,988	
		7 Social security tips 9,552,077	8 Allocated tips 81,322	
d Control number		9 Verification code	10 Dependent care benefits 2,020,137	
e Employee's first name and initial Last name Suff.		11 Nonqualified plans	12a Code "C","D","E","F"	63,975,542
		13 Statutory employee ☐ Retirement plan ☐ Third-party sick pay ☐	12b Code "AA"	5,541,790
		14 Other	12c Code "DD"	68,712,340
			12d Code "W"	12,847,304
f Employee's address and ZIP code				

15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name

Form **W-2** **Wage and Tax Statement** 2018 Department of the Treasury—Internal Revenue Service

Copy 1—For State, City, or Local Tax Department

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

TRANSFEROR'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 195,042**		**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3921** (Rev. October 2017)	**Exercise of an Incentive Stock Option Under Section 422(b)**
TRANSFEROR'S TIN	EMPLOYEE'S TIN	**3** Exercise price per share $ 5,296	**4** Fair market value per share on exercise date $ 25,661	**Copy B** **For Employee**
EMPLOYEE'S name		**5** No. of shares transferred		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**6** If other than TRANSFEROR, name, address, and TIN of corporation whose stock is being transferred		
Account number (see instructions)				

Form **3921** (Rev. October 2017) (keep for your records) www.irs.gov/Form3921 Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

TRANSFEROR'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 195,042**		**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3921** (Rev. October 2017)	**Exercise of an Incentive Stock Option Under Section 422(b)**
TRANSFEROR'S TIN	EMPLOYEE'S TIN	**3** Exercise price per share $ **164,963**	**4** Fair market value per share on exercise date $ **186,990**	**Copy B** **For Employee**
EMPLOYEE'S name		**5** No. of shares transferred		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**6** If other than TRANSFEROR, name, address, and TIN of corporation whose stock is being transferred		
Account number (see instructions)				

Form **3921** (Rev. October 2017) (keep for your records) www.irs.gov/Form3921 Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

TRANSFEROR'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all individuals represented = 89,387**		**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3921** (Rev. October 2017)	**Exercise of an Incentive Stock Option Under Section 422(b)**
TRANSFEROR'S TIN	EMPLOYEE'S TIN	**3** Exercise price per share $ **75,264**	**4** Fair market value per share on exercise date $ **83,946**	**Copy B** **For Employee**
EMPLOYEE'S name		**5** No. of shares transferred		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**6** If other than TRANSFEROR, name, address, and TIN of corporation whose stock is being transferred		
Account number (see instructions)				

Form **3921** (Rev. October 2017) (keep for your records) www.irs.gov/Form3921 Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

2626 ☐ VOID ☐ CORRECTED

CORPORATION'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 6,285,883**	**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3922** (Rev. September 2016)	**Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c)**
CORPORATION'S federal identification number / EMPLOYEE'S identification number	**3** Fair market value per share on grant date $ 625,841	**4** Fair market value per share on exercise date $ 640,373	**Copy A** **For Internal Revenue Service Center** **File with Form 1096.**
EMPLOYEE'S name	**5** Exercise price paid per share $ 547,666	**6** No. of shares transferred	
Street address (including apt. no.)	**7** Date legal title transferred		For Privacy Act and Paperwork Reduction Act Notice, see the **current version of the General Instructions for Certain Information Returns.**
City or town, state or province, country, and ZIP or foreign postal code	**8** Exercise price per share determined as if the option was exercised on the date shown in box 1 $ 532,851		
Account number (see instructions)			

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

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

2626 ☐ VOID ☐ CORRECTED

CORPORATION'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 6,285,883**		**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3922** (Rev. September 2016)	**Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c)**
CORPORATION'S federal identification number	EMPLOYEE'S identification number	**3** Fair market value per share on grant date $ **6,283,217**	**4** Fair market value per share on exercise date $ **6,282,598**	**Copy A** **For Internal Revenue Service Center** **File with Form 1096.**
EMPLOYEE'S name		**5** Exercise price paid per share $ **6,281,903**	**6** No. of shares transferred	
Street address (including apt. no.)		**7** Date legal title transferred		For Privacy Act and Paperwork Reduction Act Notice, see the **current version of the General Instructions for Certain Information Returns.**
City or town, state or province, country, and ZIP or foreign postal code		**8** Exercise price per share determined as if the option was exercised on the date shown in box 1 $ **5,897,105**		
Account number (see instructions)				

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

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Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

2626 ☐ VOID ☐ CORRECTED

CORPORATION'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all individuals represented = 1,917,218**		**1** Date option granted **2** Date option exercised	OMB No. 1545-2129 **Form 3922** (Rev. September 2016)	**Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c)**
CORPORATION'S federal identification number	EMPLOYEE'S identification number	**3** Fair market value per share on grant date $ 1,916,913	**4** Fair market value per share on exercise date $ 1,916,301	**Copy A** **For Internal Revenue Service Center** **File with Form 1096.**
EMPLOYEE'S name		**5** Exercise price paid per share $ 1,916,607	**6** No. of shares transferred	
Street address (including apt. no.)		**7** Date legal title transferred		For Privacy Act and Paperwork Reduction Act Notice, see the **current version of the General Instructions for Certain Information Returns.**
City or town, state or province, country, and ZIP or foreign postal code		**8** Exercise price per share determined as if the option was exercised on the date shown in box 1 $ 1,865,159		
Account number (see instructions)				

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Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

2727 ☐ VOID ☐ CORRECTED

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 19,248,539**		1 Employee or self-employed person's Archer MSA contributions made in 2018 and 2019 for 2018 $ *	OMB No. 1545-1518 2018 Form **5498-SA**	**HSA, Archer MSA, or Medicare Advantage MSA Information**
		2 Total contributions made in 2018 $ 34,556,704		
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2019 for 2018 $ 1,197,587		**Copy A** **For Internal Revenue Service Center**
PARTICIPANT'S name		4 Rollover contributions $ 79,230	5 Fair market value of HSA, Archer MSA, or MA MSA $ 53,387,606	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)		6 HSA ☐ Archer MSA ☐ MA MSA ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

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

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*** Data not shown because of the small number of sample returns on which it is based.**
Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

2727 ☐ VOID ☐ CORRECTED

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 19,248,539**		1 Employee or self-employed person's Archer MSA contributions made in 2018 and 2019 for 2018 $ *	OMB No. 1545-1518 2018 Form **5498-SA**	**HSA, Archer MSA, or Medicare Advantage MSA Information**
		2 Total contributions made in 2018 $ 14,487,217		
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2019 for 2018 $ 1,658,992		**Copy A** **For Internal Revenue Service Center**
PARTICIPANT'S name		4 Rollover contributions $ 15,552	5 Fair market value of HSA, Archer MSA, or MA MSA $ 17,155,397	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)		6 HSA ☐ Archer MSA ☐ MA MSA ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

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

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*** Data not shown because of the small number of sample returns on which it is based.**

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

2727 ☐ VOID ☐ CORRECTED

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all individuals represented = 17,635,444**		1 Employee or self-employed person's Archer MSA contributions made in 2018 and 2019 for 2018 $ *	OMB No. 1545-1518 2018 Form **5498-SA**	**HSA, Archer MSA, or Medicare Advantage MSA Information**
		2 Total contributions made in 2018 $ 13,789,993		
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2019 for 2018 $ 1,649,083		**Copy A** **For Internal Revenue Service Center**
PARTICIPANT'S name		4 Rollover contributions $ 15,414	5 Fair market value of HSA, Archer MSA, or MA MSA $ 16,169,485	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)		6 HSA ☐ Archer MSA ☐ MA MSA ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

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

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

*** Data not shown because of the small number of sample returns on which it is based.**
Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 132,838,151**	1 IRA contributions (other than amounts in boxes 2–4, 8–10, 13a, and 14a) $ 20,430,899	OMB No. 1545-0747 2018 Form 5498	**IRA Contribution Information**
	2 Rollover contributions $ 589,664,714		
TRUSTEE'S or ISSUER'S TIN / PARTICIPANT'S TIN	3 Roth IRA conversion amount $ 15,781,579	4 Recharacterized contributions $ 604,220	**Copy B**
	5 FMV of account $ 10,150,000,000	6 Life insurance cost included in box 1 $ *	**For Participant**
PARTICIPANT'S name	7 IRA ☐ SEP ☐ SIMPLE ☐ Roth IRA ☐		This information is being furnished to the IRS.
	8 SEP contributions $ 17,758,581	9 SIMPLE contributions $ 11,389,435	
Street address (including apt. no.)	10 Roth IRA contributions $ 25,531,005	11 If checked, required minimum distribution for 2019 ☐	
	12a RMD date	12b RMD amount $ 38,171,233	
City or town, state or province, country, and ZIP or foreign postal code	13a Postponed/late contrib. $ 120,557	13b Year / 13c Code	
	14a Repayments $ -	14b Code	
Account number (see instructions)	15a FMV of certain specified assets $ 156,653,306	15b Code(s)	

Form **5498** (keep for your records) www.irs.gov/Form5498 Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all forms filed = 132,838,151**		1 IRA contributions (other than amounts in boxes 2–4, 8–10, 13a, and 14a) $ 5,270,036	OMB No. 1545-0747 2018 Form 5498	**IRA Contribution Information**
		2 Rollover contributions $ 6,199,902		
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	3 Roth IRA conversion amount $ 835,911	4 Recharacterized contributions $ 97,517	**Copy B**
		5 FMV of account $ 127,298,723	6 Life insurance cost included in box 1 $ *	**For Participant**
PARTICIPANT'S name		7 IRA ☐ SEP ☐ SIMPLE ☐ Roth IRA ☐		This information is being furnished to the IRS.
		8 SEP contributions $ 1,376,220	9 SIMPLE contributions $ 3,117,768	
Street address (including apt. no.)		10 Roth IRA contributions $ 9,049,237	11 If checked, required minimum distribution for 2019 ☐	
		12a RMD date	12b RMD amount $ 4,621,831	
City or town, state or province, country, and ZIP or foreign postal code		13a Postponed/late contrib. $ 22,833	13b Year / 13c Code	
		14a Repayments $ -	14b Code	
Account number (see instructions)		15a FMV of certain specified assets $ 1,643,373	15b Code(s)	

Form **5498** (keep for your records) www.irs.gov/Form5498 Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code **Total of all individuals represented = 71,131,219**		1 IRA contributions (other than amounts in boxes 2–4, 8–10, 13a, and 14a) $ 4,737,078	OMB No. 1545-0747 2018 Form 5498	**IRA Contribution Information**
		2 Rollover contributions $ 5,244,501		
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	3 Roth IRA conversion amount $ 777,276	4 Recharacterized contributions $ 89,594	**Copy B**
		5 FMV of account $ 69,272,368	6 Life insurance cost included in box 1 $ *	**For Participant**
PARTICIPANT'S name		7 IRA ☐ SEP ☐ SIMPLE ☐ Roth IRA ☐		This information is being furnished to the IRS.
		8 SEP contributions $ 1,189,039	9 SIMPLE contributions $ 2,143,275	
Street address (including apt. no.)		10 Roth IRA contributions $ 7,592,802	11 If checked, required minimum distribution for 2019 ☐	
		12a RMD date	12b RMD amount $ 3,823,745	
City or town, state or province, country, and ZIP or foreign postal code		13a Postponed/late contrib. $ 22,825	13b Year / 13c Code	
		14a Repayments $ -	14b Code	
Account number (see instructions)		15a FMV of certain specified assets $ 1,513,421	15b Code(s)	

Form **5498** (keep for your records) www.irs.gov/Form5498 Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**
Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

3131 ☐ VOID ☐ CORRECTED

PAYER'S/TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross distribution	OMB No. 1545-1760	Payments From Qualified Education Programs (Under Sections 529 and 530)
Total of all forms filed = 3,540,915		$ 32,222,334	2018	
		2 Earnings $ 10,137,910	Form 1099-Q	
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis $ 20,321,564	4 Trustee-to-trustee transfer ☐	**Copy A For Internal Revenue Service Center**
RECIPIENT'S name		5 Distribution is from: • Qualified tuition program— Private ☐ or State ☐ • Coverdell ESA ☐	6 Check if the recipient is not the designated beneficiary ☐	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **1099-Q** Cat. No. 32223J www.irs.gov/Form1099Q Department of the Treasury - Internal Revenue Service

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Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

3131 ☐ VOID ☐ CORRECTED

PAYER'S/TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 3,540,915**		**1** Gross distribution $ **3,535,973**	OMB No. 1545-1760 **2018** Form **1099-Q**	**Payments From Qualified Education Programs (Under Sections 529 and 530)**
		2 Earnings $ **3,080,132**		
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	**3** Basis $ **3,148,585**	**4** Trustee-to-trustee transfer ☐	**Copy A** **For Internal Revenue Service Center**
RECIPIENT'S name		**5** Distribution is from: • Qualified tuition program— Private ☐ **or** State ☐ • Coverdell ESA ☐	**6** Check if the recipient is not the designated beneficiary ☐	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **1099-Q** Cat. No. 32223J www.irs.gov/Form1099Q Department of the Treasury - Internal Revenue Service

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

3131 ☐ VOID ☐ CORRECTED

PAYER'S/TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 2,507,332**		**1** Gross distribution $ 2,505,937	OMB No. 1545-1760 **2018** Form **1099-Q**	**Payments From Qualified Education Programs (Under Sections 529 and 530)**
		2 Earnings $ 2,172,362		
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	**3** Basis $ 2,225,733	**4** Trustee-to-trustee transfer ☐	**Copy A** **For Internal Revenue Service Center**
RECIPIENT'S name		**5** Distribution is from: • Qualified tuition program— Private ☐ **or** State ☐ • Coverdell ESA ☐	**6** Check if the recipient is not the designated beneficiary ☐	**File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2018 General Instructions for Certain Information Returns.**
Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **1099-Q** Cat. No. 32223J www.irs.gov/Form1099Q Department of the Treasury - Internal Revenue Service

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

OMB No. 1545-0238

2018

Form W-2G

Certain Gambling Winnings

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code **Total of all forms filed = 17,292,479**	**1** Reportable winnings $ 65,298,812	**2** Date won
	3 Type of wager	**4** Federal income tax withheld $ 2,274,098
	5 Transaction	**6** Race
	7 Winnings from identical wagers $ 139,283	**8** Cashier
PAYER'S federal identification number / PAYER'S telephone number	**9** Winner's taxpayer identification no.	**10** Window
WINNER'S name	**11** First I.D.	**12** Second I.D.
Street address (including apt. no.)	**13** State/Payer's state identification no.	**14** State winnings $
City or town, province or state, country, and ZIP or foreign postal code	**15** State income tax withheld $	**16** Local winnings $
	17 Local income tax withheld $	**18** Name of locality

This information is being furnished to the Internal Revenue Service

Copy B

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

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

Signature ▶ **Date ▶**

Form **W-2G** www.irs.gov/w2g Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

OMB No. 1545-0238

2018

Form W-2G

Certain Gambling Winnings

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code **Total of all forms filed = 17,292,479**	**1** Reportable winnings $ 17,257,900	**2** Date won
	3 Type of wager	**4** Federal income tax withheld $ 983,778
	5 Transaction	**6** Race
	7 Winnings from identical wagers $ 49,712	**8** Cashier
PAYER'S federal identification number / PAYER'S telephone number	**9** Winner's taxpayer identification no.	**10** Window
WINNER'S name	**11** First I.D.	**12** Second I.D.
Street address (including apt. no.)	**13** State/Payer's state identification no.	**14** State winnings $
City or town, province or state, country, and ZIP or foreign postal code	**15** State income tax withheld $	**16** Local winnings $
	17 Local income tax withheld $	**18** Name of locality

This information is being furnished to the Internal Revenue Service

Copy B

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

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

Signature ▶ **Date ▶**

Form **W-2G** www.irs.gov/w2g Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

OMB No. 1545-0238

2018

Form W-2G

Certain Gambling Winnings

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code **Total of all forms filed = 5,297,226**	**1** Reportable winnings $ 5,285,327	**2** Date won
	3 Type of wager	**4** Federal income tax withheld $ 470,722
	5 Transaction	**6** Race
PAYER'S federal identification number / PAYER'S telephone number	**7** Winnings from identical wagers $ 31,277	**8** Cashier
	9 Winner's taxpayer identification no.	**10** Window
WINNER'S name	**11** First I.D.	**12** Second I.D.
Street address (including apt. no.)	**13** State/Payer's state identification no.	**14** State winnings $
City or town, province or state, country, and ZIP or foreign postal code	**15** State income tax withheld $	**16** Local winnings $
	17 Local income tax withheld $	**18** Name of locality

This information is being furnished to the Internal Revenue Service

Copy B

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

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

Signature ▶ **Date ▶**

Form **W-2G** www.irs.gov/w2g Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)
Total of all forms filed = 70,460

Form **8805**

Department of the Treasury
Internal Revenue Service

Foreign Partner's Information Statement of Section 1446 Withholding Tax

▶ **Go to *www.irs.gov/Form8805* for instructions and the latest information.**

For partnership's calendar year 2018, or tax year beginning , 2018, and ending , 20

OMB No. 1545-0123

2018

Copy A for Internal Revenue Service
Attach to Form 8804.

1a Foreign partner's name	**b** U.S. identifying number	**5a** Name of partnership	**b** U.S. Employer Identification Number (EIN)
c Address (if a foreign address, see instructions)		**c** Address (if a foreign address, see instructions)	
2 Account number assigned by partnership (if any)		**6** Withholding agent's name. If partnership is also the withholding agent, enter "SAME" and do not complete line 7.	
3 Type of partner (specify—see instructions) ▶			
4 Country code of partner (enter two-letter code; see instructions)		**7** Withholding agent's U.S. EIN	

8a Check if the partnership identified on line 5a owns an interest in one or more partnerships . . . . . ☐

b Check if any of the partnership's effectively connected taxable income (ECTI) is exempt from U.S. tax for the partner identified on line 1a ☐

9	Partnership's ECTI allocable to partner for the tax year (see instructions)	**9**	1,296,381
10	Total tax credit allowed to partner under section 1446 (see instructions). **Individual and corporate partners:** Claim this amount as a credit against your U.S. income tax on Form 1040NR, 1120-F, etc.	**10**	310,059

Schedule T—Beneficiary Information (see instructions)

11a Name of beneficiary	**c** Address (if a foreign address, see instructions)
b U.S. identifying number of beneficiary	

12	Amount of ECTI on line 9 to be included in the beneficiary's gross income (see instructions)	**12**	0
13	Amount of tax credit on line 10 that the beneficiary is entitled to claim on its return (see instructions) . .	**13**	0

For Paperwork Reduction Act Notice, see separate Instructions for Forms 8804, 8805, and 8813. Cat. No. 10078E Form **8805** (2018)

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line
Total of all forms filed = 70,460

Form **8805**

Department of the Treasury
Internal Revenue Service

Foreign Partner's Information Statement of Section 1446 Withholding Tax

▶ **Go to *www.irs.gov/Form8805* for instructions and the latest information.**

For partnership's calendar year 2018, or tax year beginning , 2018, and ending , 20

OMB No. 1545-0123

2018

Copy A for Internal Revenue Service
Attach to Form 8804.

1a Foreign partner's name	**b** U.S. identifying number	**5a** Name of partnership	**b** U.S. Employer Identification Number (EIN)
c Address (if a foreign address, see instructions)		**c** Address (if a foreign address, see instructions)	
2 Account number assigned by partnership (if any)		**6** Withholding agent's name. If partnership is also the withholding agent, enter "SAME" and do not complete line 7.	
3 Type of partner (specify—see instructions) ▶			
4 Country code of partner (enter two-letter code; see instructions)		**7** Withholding agent's U.S. EIN	

8a Check if the partnership identified on line 5a owns an interest in one or more partnerships . . . . . ☐

b Check if any of the partnership's effectively connected taxable income (ECTI) is exempt from U.S. tax for the partner identified on line 1a ☐

9	Partnership's ECTI allocable to partner for the tax year (see instructions)	**9**	56,740
10	Total tax credit allowed to partner under section 1446 (see instructions). **Individual and corporate partners:** Claim this amount as a credit against your U.S. income tax on Form 1040NR, 1120-F, etc.	**10**	39,896

Schedule T—Beneficiary Information (see instructions)

11a Name of beneficiary	**c** Address (if a foreign address, see instructions)
b U.S. identifying number of beneficiary	

12	Amount of ECTI on line 9 to be included in the beneficiary's gross income (see instructions)	**12**	0
13	Amount of tax credit on line 10 that the beneficiary is entitled to claim on its return (see instructions) . .	**13**	0

For Paperwork Reduction Act Notice, see separate Instructions for Forms 8804, 8805, and 8813. Cat. No. 10078E Form **8805** (2018)

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

Total of all individuals represented = 54,954

Form **8805**

Department of the Treasury
Internal Revenue Service

Foreign Partner's Information Statement of Section 1446 Withholding Tax

▶ **Go to *www.irs.gov/Form8805* for instructions and the latest information.**

For partnership's calendar year 2018, or tax year beginning , 2018, and ending , 20

OMB No. 1545-0123

2018

Copy A for Internal Revenue Service
Attach to Form 8804.

1a Foreign partner's name	**b** U.S. identifying number	**5a** Name of partnership	**b** U.S. Employer Identification Number (EIN)
c Address (if a foreign address, see instructions)		**c** Address (if a foreign address, see instructions)	
2 Account number assigned by partnership (if any)		**6** Withholding agent's name. If partnership is also the withholding agent, enter "SAME" and do not complete line 7.	
3 Type of partner (specify—see instructions) ▶			
4 Country code of partner (enter two-letter code; see instructions)		**7** Withholding agent's U.S. EIN	

8a Check if the partnership identified on line 5a owns an interest in one or more partnerships . . . . . ☐

b Check if any of the partnership's effectively connected taxable income (ECTI) is exempt from U.S. tax for the partner identified on line 1a ☐

9	Partnership's ECTI allocable to partner for the tax year (see instructions)	**9**	43,408
10	Total tax credit allowed to partner under section 1446 (see instructions). **Individual and corporate partners:** Claim this amount as a credit against your U.S. income tax on Form 1040NR, 1120-F, etc.	**10**	33,444

Schedule T—Beneficiary Information (see instructions)

11a Name of beneficiary	**c** Address (if a foreign address, see instructions)
b U.S. identifying number of beneficiary	

12	Amount of ECTI on line 9 to be included in the beneficiary's gross income (see instructions)	**12**	0
13	Amount of tax credit on line 10 that the beneficiary is entitled to claim on its return (see instructions) . .	**13**	0

For Paperwork Reduction Act Notice, see separate Instructions for Forms 8804, 8805, and 8813. Cat. No. 10078E Form **8805** (2018)

Estimates exclude duplicates and returns replaced by amendeds.

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

Total of all forms filed = 1,793

Information Return for Federal Contracts

Submit with Form 8596-A.

1 Name and address of contractor		**2** Contractor's taxpayer identification number	
3 Name of common parent, if applicable (See instructions.)		**4** Common parent's employer identification number, if applicable (See instructions.)	
5 Name of Federal executive agency		**6** Federal executive agency's employer identification number	
7 Date of contract action	**8** Expected date of contract completion	**9** Total amount obligated under the contract $ 2,115,823	
10 Contract number	**11** Agency code	**12** Contract office number	**13** Contract modification number

General Instructions

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

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

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

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

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

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

Quarter	Due Date
January, February, March	April 30
April, May, June	July 31
July, August, September	October 31
October, November, December	January 31

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

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

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

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

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

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

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

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

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

Total of all forms filed = 1,793

Information Return for Federal Contracts

Submit with Form 8596-A.

1 Name and address of contractor	**2** Contractor's taxpayer identification number
3 Name of common parent, if applicable (See instructions.)	**4** Common parent's employer identification number, if applicable (See instructions.)
5 Name of Federal executive agency	**6** Federal executive agency's employer identification number

7 Date of contract action	**8** Expected date of contract completion	**9** Total amount obligated under the contract $ 1,793	
10 Contract number	**11** Agency code	**12** Contract office number	**13** Contract modification number

General Instructions

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

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

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

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

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

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

Quarter	Due Date
January, February, March	April 30
April, May, June	July 31
July, August, September	October 31
October, November, December	January 31

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

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

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

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

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

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

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

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

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

Total of all forms filed = 1,394

Information Return for Federal Contracts

Submit with Form 8596-A.

1 Name and address of contractor	**2** Contractor's taxpayer identification number
3 Name of common parent, if applicable (See instructions.)	**4** Common parent's employer identification number, if applicable (See instructions.)
5 Name of Federal executive agency	**6** Federal executive agency's employer identification number

7 Date of contract action	**8** Expected date of contract completion	**9** Total amount obligated under the contract $ 1,394	
10 Contract number	**11** Agency code	**12** Contract office number	**13** Contract modification number

General Instructions

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

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

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

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

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

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

Quarter	Due Date
January, February, March	April 30
April, May, June	July 31
July, August, September	October 31
October, November, December	January 31

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

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

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

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

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

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

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

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

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

651118

Total of all forms filed = 25,082,016

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

Schedule K-1 (Form 1065) **2018**

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Partner's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number

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

C IRS Center where partnership filed return

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

Part II Information About the Partner

E Partner's identifying number

F Partner's name, address, city, state, and ZIP code

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

H ☐ Domestic partner ☐ Foreign partner

I1 What type of entity is this partner?

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

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

	Beginning	Ending
Profit	%	%
Loss	%	%
Capital	%	%

K Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	$ 1,786,000,000	$ -
Qualified nonrecourse financing	$ 3,251,900,000	$ 3,390,800,000
Recourse	$ 1,942,000,000	$ -

L Partner's capital account analysis:

Beginning capital account $
Capital contributed during the year $
Current year increase (decrease) $
Withdrawals & distributions $ ( )
Ending capital account $

☐ Tax basis ☐ GAAP ☐ Section 704(b) book
☐ Other (explain)

M Did the partner contribute property with a built-in gain or loss?
☐ Yes ☐ No
If "Yes," attach statement (see instructions)

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 279,840,047	15	Credits
2	Net rental real estate income (loss) (53,593,509)		
3	Other net rental income (loss) 11,104,952	16	Foreign transactions
4	Guaranteed payments 73,312,731		
5	Interest income 69,977,886		
6a	Ordinary dividends 62,061,321		
6b	Qualified dividends		
6c	Dividend equivalents 319,086		
7	Royalties 17,859,467		
8	Net short-term capital gain (loss) 18,414,204	17	Alternative minimum tax (AMT) items
9a	Net long-term capital gain (loss) 429,419,030		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	18	Tax-exempt income and nondeductible expenses
10	Net section 1231 gain (loss)		
11	Other income (loss) 407,645	19	Distributions
12	Section 179 deduction 7,788,027	20	Other information
13	Other deductions 215,030		
14	Self-employment earnings (loss)		

*See attached statement for additional information.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

651118

Total of all forms filed = 25,082,016

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

Schedule K-1 (Form 1065) **2018**

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Partner's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number

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

C IRS Center where partnership filed return

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

Part II Information About the Partner

E Partner's identifying number

F Partner's name, address, city, state, and ZIP code

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

H ☐ Domestic partner ☐ Foreign partner

I1 What type of entity is this partner?

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

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

	Beginning	Ending
Profit	%	%
Loss	%	%
Capital	%	%

K Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	$ 6,718,159	$ -
Qualified nonrecourse financing	$ 3,183,228	$ 3,374,959
Recourse	$ 3,170,909	$ -

L Partner's capital account analysis:

Beginning capital account $
Capital contributed during the year $
Current year increase (decrease) $
Withdrawals & distributions $ ( )
Ending capital account $

☐ Tax basis ☐ GAAP ☐ Section 704(b) book
☐ Other (explain)

M Did the partner contribute property with a built-in gain or loss?
☐ Yes ☐ No
If "Yes," attach statement (see instructions)

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 13,300,721	15	Credits
2	Net rental real estate income (loss) 8,085,980		
3	Other net rental income (loss) 779,001	16	Foreign transactions
4	Guaranteed payments 871,524		
5	Interest income 10,043,145		
6a	Ordinary dividends 5,120,673		
6b	Qualified dividends		
6c	Dividend equivalents 132,555		
7	Royalties 2,363,356		
8	Net short-term capital gain (loss) 1,477,299	17	Alternative minimum tax (AMT) items
9a	Net long-term capital gain (loss) 4,327,187		
9b	Collectibles (28%) gain (loss)		
9c	Unrecaptured section 1250 gain	18	Tax-exempt income and nondeductible expenses
10	Net section 1231 gain (loss)		
11	Other income (loss) 288,254	19	Distributions
12	Section 179 deduction 621,623	20	Other information
13	Other deductions 253,705		
14	Self-employment earnings (loss)		

*See attached statement for additional information.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

651118

Total of all individuals represented = 14,054,102

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

Schedule K-1 (Form 1065) **2018**

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Partner's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Partnership

A Partnership's employer identification number

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

C IRS Center where partnership filed return

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

Part II Information About the Partner

E Partner's identifying number

F Partner's name, address, city, state, and ZIP code

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

H ☐ Domestic partner ☐ Foreign partner

I1 What type of entity is this partner?

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

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

	Beginning	Ending
Profit	%	%
Loss	%	%
Capital	%	%

K Partner's share of liabilities:

	Beginning	Ending
Nonrecourse	$ 4,033,064	$ -
Qualified nonrecourse financing	$ 2,070,536	$ 2,147,955
Recourse	$ 2,292,151	$ -

L Partner's capital account analysis:

Beginning capital account $
Capital contributed during the year $
Current year increase (decrease) $
Withdrawals & distributions $ ( )
Ending capital account $

☐ Tax basis ☐ GAAP ☐ Section 704(b) book
☐ Other (explain)

M Did the partner contribute property with a built-in gain or loss?
☐ **Yes** ☐ **No**
If "Yes," attach statement (see instructions)

Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss)	8,350,311	15	Credits
2	Net rental real estate income (loss)	5,230,365		
3	Other net rental income (loss)	622,521	16	Foreign transactions
4	Guaranteed payments	807,958		
5	Interest income	6,079,588		
6a	Ordinary dividends	3,338,043		
6b	Qualified dividends			
6c	Dividend equivalents	111,231		
7	Royalties	1,753,184		
8	Net short-term capital gain (loss)	1,157,336	17	Alternative minimum tax (AMT) items
9a	Net long-term capital gain (loss)	2,989,948		
9b	Collectibles (28%) gain (loss)			
9c	Unrecaptured section 1250 gain		18	Tax-exempt income and nondeductible expenses
10	Net section 1231 gain (loss)			
11	Other income (loss)	246,747	19	Distributions
12	Section 179 deduction	547,027	20	Other information
13	Other deductions	217,963		
14	Self-employment earnings (loss)			

*See attached statement for additional information.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

661117

Total of all forms filed = 3,452,941

☐ Final K-1 ☐ Amended K-1 OMB No. 1545-0092

Schedule K-1 (Form 1041)

Department of the Treasury
Internal Revenue Service

2018

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Beneficiary's Share of Income, Deductions, Credits, etc.

▶ See back of form and instructions.

Part I Information About the Estate or Trust

A Estate's or trust's employer identification number

B Estate's or trust's name

C Fiduciary's name, address, city, state, and ZIP code

D ☐ Check if Form 1041-T was filed and enter the date it was filed

E ☐ Check if this is the final Form 1041 for the estate or trust

Part II Information About the Beneficiary

F Beneficiary's identifying number

G Beneficiary's name, address, city, state, and ZIP code

H ☐ Domestic beneficiary ☐ Foreign beneficiary

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items

1	Interest income 5,276,153	11	Final year deductions
2a	Ordinary dividends 31,484,213		
2b	Qualified dividends		
3	Net short-term capital gain 344,086		
4a	Net long-term capital gain 34,169,083		
4b	28% rate gain	12	Alternative minimum tax adjustment
4c	Unrecaptured section 1250 gain		
5	Other portfolio and nonbusiness income 10,869,968		
6	Ordinary business income 5,474,310		
7	Net rental real estate income 13,650,631	13	Credits and credit recapture
8	Other rental income 125,291		
9	Directly apportioned deductions		
		14	Other information 18,505,956
10	Estate tax deduction		

*See attached statement for additional information.

Note: A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

661117

Total of all forms filed = 3,452,941

☐ Final K-1 ☐ Amended K-1 OMB No. 1545-0092

Schedule K-1 (Form 1041)

Department of the Treasury
Internal Revenue Service

2018

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Beneficiary's Share of Income, Deductions, Credits, etc.

▶ See back of form and instructions.

Part I Information About the Estate or Trust

A Estate's or trust's employer identification number

B Estate's or trust's name

C Fiduciary's name, address, city, state, and ZIP code

D ☐ Check if Form 1041-T was filed and enter the date it was filed

E ☐ Check if this is the final Form 1041 for the estate or trust

Part II Information About the Beneficiary

F Beneficiary's identifying number

G Beneficiary's name, address, city, state, and ZIP code

H ☐ Domestic beneficiary ☐ Foreign beneficiary

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items

1	Interest income 1,287,203	11	Final year deductions
2a	Ordinary dividends 1,340,221		
2b	Qualified dividends		
3	Net short-term capital gain 83,892		
4a	Net long-term capital gain 392,991		
4b	28% rate gain	12	Alternative minimum tax adjustment
4c	Unrecaptured section 1250 gain		
5	Other portfolio and nonbusiness income 504,374		
6	Ordinary business income 123,905		
7	Net rental real estate income 299,990	13	Credits and credit recapture
8	Other rental income 11,583		
9	Directly apportioned deductions		
		14	Other information 1,988,568
10	Estate tax deduction		

*See attached statement for additional information.

Note: A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

661117

Total of all individuals represented = 2,951,058

☐ Final K-1 ☐ Amended K-1 OMB No. 1545-0092

Schedule K-1 (Form 1041) **2018**

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Beneficiary's Share of Income, Deductions, Credits, etc.

▶ See back of form and instructions.

Part I Information About the Estate or Trust

A Estate's or trust's employer identification number

B Estate's or trust's name

C Fiduciary's name, address, city, state, and ZIP code

D ☐ Check if Form 1041-T was filed and enter the date it was filed

E ☐ Check if this is the final Form 1041 for the estate or trust

Part II Information About the Beneficiary

F Beneficiary's identifying number

G Beneficiary's name, address, city, state, and ZIP code

H ☐ Domestic beneficiary ☐ Foreign beneficiary

Part III Beneficiary's Share of Current Year Income, Deductions, Credits, and Other Items

1	Interest income 1,169,007	11	Final year deductions
2a	Ordinary dividends 1,137,740		
2b	Qualified dividends		
3	Net short-term capital gain 79,350		
4a	Net long-term capital gain 360,386		
4b	28% rate gain	12	Alternative minimum tax adjustment
4c	Unrecaptured section 1250 gain		
5	Other portfolio and nonbusiness income 468,757		
6	Ordinary business income 108,468		
7	Net rental real estate income 275,562	13	Credits and credit recapture
8	Other rental income 10,728		
9	Directly apportioned deductions		
		14	Other information 1,726,535
10	Estate tax deduction		

*See attached statement for additional information.

Note: A statement must be attached showing the beneficiary's share of income and directly apportioned deductions from each business, rental real estate, and other rental activity.

For IRS Use Only

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

671117

Total of all forms filed = 8,687,809

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

Schedule K-1 (Form 1120S)

Department of the Treasury
Internal Revenue Service

2018

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Shareholder's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Corporation

A Corporation's employer identification number

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

C IRS Center where corporation filed return

Part II Information About the Shareholder

D Shareholder's identifying number

E Shareholder's name, address, city, state, and ZIP code

F Shareholder's percentage of stock ownership for tax year . . . . . %

For IRS Use Only

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 715,913,543	13	Credits 5,018,845
2	Net rental real estate income (loss) 25,000,086		
3	Other net rental income (loss) 803,425		
4	Interest income 22,356,183		
5a	Ordinary dividends 9,799,116		
5b	Qualified dividends	14	Foreign transactions
6	Royalties 14,255,905		
7	Net short-term capital gain (loss) 2,386,128		
8a	Net long-term capital gain (loss) 135,393,560		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction 31,171,536	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information

* See attached statement for additional information.

For Paperwork Reduction Act Notice, see the Instructions for Form 1120S. www.irs.gov/Form1120S Cat. No. 11520D Schedule K-1 (Form 1120S) 2018

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

671117

Total of all forms filed = 8,687,809

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

Schedule K-1 (Form 1120S)

Department of the Treasury
Internal Revenue Service

2018

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Shareholder's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Corporation

A Corporation's employer identification number

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

C IRS Center where corporation filed return

Part II Information About the Shareholder

D Shareholder's identifying number

E Shareholder's name, address, city, state, and ZIP code

F Shareholder's percentage of stock ownership for tax year . . . . . %

For IRS Use Only

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 7,860,373	13	Credits 345,600
2	Net rental real estate income (loss) 839,759		
3	Other net rental income (loss) 79,698		
4	Interest income 1,903,878		
5a	Ordinary dividends 389,217		
5b	Qualified dividends	14	Foreign transactions
6	Royalties 73,220		
7	Net short-term capital gain (loss) 166,265		
8a	Net long-term capital gain (loss) 378,184		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction 960,427	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information

* See attached statement for additional information.

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

671117

Total of all individuals represented = 7,189,221

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

Schedule K-1 (Form 1120S) **2018**

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax year

beginning / / 2018 ending / /

Shareholder's Share of Income, Deductions, Credits, etc.

▶ See back of form and separate instructions.

Part I Information About the Corporation

A Corporation's employer identification number

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

C IRS Center where corporation filed return

Part II Information About the Shareholder

D Shareholder's identifying number

E Shareholder's name, address, city, state, and ZIP code

F Shareholder's percentage of stock ownership for tax year . . . . . %

For IRS Use Only

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

1	Ordinary business income (loss) 6,709,996	13	Credits 296,899
2	Net rental real estate income (loss) 719,014		
3	Other net rental income (loss) 75,222		
4	Interest income 1,714,323		
5a	Ordinary dividends 360,246		
5b	Qualified dividends	14	Foreign transactions
6	Royalties 66,981		
7	Net short-term capital gain (loss) 156,106		
8a	Net long-term capital gain (loss) 355,160		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative minimum tax (AMT) items
11	Section 179 deduction 906,627	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information

* See attached statement for additional information.

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		1 Coverdell ESA contributions	OMB No. 1545-1815	**Coverdell ESA Contribution Information**
Total of all forms filed = 479,968		$ 471,696	2018	
		2 Rollover contributions $ 103,645	Form **5498-ESA**	
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN			**Copy B** **For Beneficiary** This information is being furnished to the IRS.
BENEFICIARY'S name				
Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **5498-ESA** (keep for your records) www.irs.gov/Form5498ESA Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		1 Coverdell ESA contributions	OMB No. 1545-1815	**Coverdell ESA Contribution Information**
Total of all forms filed = 479,968		$ 463,838	2018	
		2 Rollover contributions $ 15,808	Form **5498-ESA**	
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN			**Copy B** **For Beneficiary** This information is being furnished to the IRS.
BENEFICIARY'S name				
Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **5498-ESA** (keep for your records) www.irs.gov/Form5498ESA Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED

TRUSTEE'S or ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		1 Coverdell ESA contributions	OMB No. 1545-1815	**Coverdell ESA Contribution Information**
Total of all individuals represented = 414,416		$ 405,556	2018	
		2 Rollover contributions $ 8,841	Form **5498-ESA**	
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN			**Copy B**
BENEFICIARY'S name				**For Beneficiary**
Street address (including apt. no.)				This information is being furnished to the IRS.
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **5498-ESA** (keep for your records) www.irs.gov/Form5498ESA Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

CORPORATION'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 830**		1 Date of sale or exchange	OMB No. 1545-1814 **2018** Form **1099-CAP**	**Changes in Corporate Control and Capital Structure**
		2 Aggregate amount rec'd* $ 195,337		
		3 No. of shares exchanged	4 Classes of stock exchanged	**Copy B** **For Shareholder**
CORPORATION'S TIN	SHAREHOLDER'S TIN			This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
SHAREHOLDER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5		
Account number (see instructions)		* You cannot claim a loss based on the amount in box 2.		

Form **1099-CAP** (keep for your records) www.irs.gov/Form1099CAP Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ CORRECTED (if checked)

CORPORATION'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 830**		1 Date of sale or exchange	OMB No. 1545-1814 **2018** Form **1099-CAP**	**Changes in Corporate Control and Capital Structure**
		2 Aggregate amount rec'd* $ 825		
		3 No. of shares exchanged	4 Classes of stock exchanged	**Copy B** **For Shareholder**
CORPORATION'S TIN	SHAREHOLDER'S TIN			This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
SHAREHOLDER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5		
Account number (see instructions)		* You cannot claim a loss based on the amount in box 2.		

Form **1099-CAP** (keep for your records) www.irs.gov/Form1099CAP Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

CORPORATION'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 821**		1 Date of sale or exchange	OMB No. 1545-1814 **2018** Form **1099-CAP**	**Changes in Corporate Control and Capital Structure**
		2 Aggregate amount rec'd* $ 821		
		3 No. of shares exchanged	4 Classes of stock exchanged	**Copy B** **For Shareholder**
CORPORATION'S TIN	SHAREHOLDER'S TIN			This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
SHAREHOLDER'S name Street address (including apt. no.)				
City or town, state or province, country, and ZIP or foreign postal code		5		
Account number (see instructions)		* You cannot claim a loss based on the amount in box 2.		

Form **1099-CAP** (keep for your records) www.irs.gov/Form1099CAP Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Date of closing	OMB No. 1545-0997	
Total of all forms filed = 3,715,537		2 Gross proceeds $ **1,135,300,000**	2018 Form **1099-S**	**Proceeds From Real Estate Transactions**
FILER'S TIN	TRANSFEROR'S TIN	3 Address (including city, state, and ZIP code) or legal description		**Copy B For Transferor** This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
TRANSFEROR'S name				
Street address (including apt. no.)		4 Transferor received or will receive property or services as part of the consideration (if checked) . . . ▶ ☐		
City or town, state or province, country, and ZIP or foreign postal code		5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) . . . . . ▶ ☐		
Account number (see instructions)		6 Buyer's part of real estate tax $ **1,173,490**		

Form **1099-S** (keep for your records) www.irs.gov/Form1099S Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 3,715,537**		1 Date of closing	OMB No. 1545-0997 2018 Form **1099-S**	**Proceeds From Real Estate Transactions**
		2 Gross proceeds $ 3,685,397		
FILER'S TIN	TRANSFEROR'S TIN	3 Address (including city, state, and ZIP code) or legal description		**Copy B** **For Transferor** This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
TRANSFEROR'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		4 Transferor received or will receive property or services as part of the consideration (if checked) . . . ▶ ☐ 5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) . . . . . ▶ ☐		
Account number (see instructions)		6 Buyer's part of real estate tax $ 1,214,042		

Form **1099-S** (keep for your records) www.irs.gov/Form1099S Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number	1 Date of closing	OMB No. 1545-0997	
Total of all individuals represented = 3,406,819	2 Gross proceeds $ 3,382,561	2018 Form **1099-S**	**Proceeds From Real Estate Transactions**

FILER'S TIN	TRANSFEROR'S TIN	3 Address (including city, state, and ZIP code) or legal description	**Copy B** **For Transferor** This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
TRANSFEROR'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		4 Transferor received or will receive property or services as part of the consideration (if checked) . . . ▶ ☐ 5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) . . . . . ▶ ☐	
Account number (see instructions)		6 Buyer's part of real estate tax $ 1,155,544	

Form **1099-S** (keep for your records) www.irs.gov/Form1099S Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 1,440,007,197**	Applicable check box on Form 8949	OMB No. 1545-0715 2018 Form **1099-B**	**Proceeds From Broker and Barter Exchange Transactions**
	1a Description of property (Example: 100 sh. XYZ Co.)		
	1b Date acquired	**1c** Date sold or disposed	
PAYER'S TIN / RECIPIENT'S TIN	**1d** Proceeds $ 11,560,000,000	**1e** Cost or other basis $ 10,351,000,000	**Copy B** **For Recipient**
	1f Accrued market discount $ 231,470	**1g** Wash sale loss disallowed $ 347,452,534	
RECIPIENT'S name	**2** Short-term gain or loss ☐ Long-term gain or loss ☐ Ordinary ☐	**3** If checked, basis reported to IRS ☐	
Street address (including apt. no.)	**4** Federal income tax withheld $ 188,988	**5** If checked, noncovered security ☐	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
City or town, state or province, country, and ZIP or foreign postal code	**6** Reported to IRS: Gross proceeds ☐ Net proceeds ☐	**7** If checked, loss is not allowed based on amount in 1d ☐	
Account number (see instructions)	**8** Profit or (loss) realized in 2018 on closed contracts $ -6,733,354	**9** Unrealized profit or (loss) on open contracts—12/31/2017 $ 78,020	
CUSIP number / FATCA filing requirement ☐	**10** Unrealized profit or (loss) on open contracts—12/31/2018 $ -1,432,369	**11** Aggregate profit or (loss) on contracts $ -8,209,717	
14 State name / **15** State identification no. / **16** State tax withheld $ / $	**12** Check if proceeds from collectibles ☐	**13** Bartering $ 78,887	

Form **1099-B** (Keep for your records) www.irs.gov/Form1099B Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 1,440,007,197**	Applicable check box on Form 8949	OMB No. 1545-0715 2018 Form **1099-B**	**Proceeds From Broker and Barter Exchange Transactions**
	1a Description of property (Example: 100 sh. XYZ Co.)		
	1b Date acquired	**1c** Date sold or disposed	
PAYER'S TIN / RECIPIENT'S TIN	**1d** Proceeds $ 1,382,224,002	**1e** Cost or other basis $ 1,278,550,834	**Copy B** **For Recipient**
	1f Accrued market discount $ 592,044	**1g** Wash sale loss disallowed $ 365,179,456	
RECIPIENT'S name	**2** Short-term gain or loss ☐ Long-term gain or loss ☐ Ordinary ☐	**3** If checked, basis reported to IRS ☐	
Street address (including apt. no.)	**4** Federal income tax withheld $ 228,652	**5** If checked, noncovered security ☐	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
City or town, state or province, country, and ZIP or foreign postal code	**6** Reported to IRS: Gross proceeds ☐ Net proceeds ☐	**7** If checked, loss is not allowed based on amount in 1d ☐	
Account number (see instructions)	**8** Profit or (loss) realized in 2018 on closed contracts $ 3,394,211	**9** Unrealized profit or (loss) on open contracts—12/31/2017 $ 816,367	
CUSIP number / FATCA filing requirement ☐	**10** Unrealized profit or (loss) on open contracts—12/31/2018 $ 182,639	**11** Aggregate profit or (loss) on contracts $ 3,472,730	
14 State name / **15** State identification no. / **16** State tax withheld $ / $	**12** Check if proceeds from collectibles ☐	**13** Bartering $ 67,710	

Form **1099-B** (Keep for your records) www.irs.gov/Form1099B Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 123,301,018**	Applicable check box on Form 8949	OMB No. 1545-0715 2018 Form **1099-B**	**Proceeds From Broker and Barter Exchange Transactions**
	1a Description of property (Example: 100 sh. XYZ Co.)		
	1b Date acquired	**1c** Date sold or disposed	
PAYER'S TIN / RECIPIENT'S TIN	**1d** Proceeds $ 120,868,605	**1e** Cost or other basis $ 110,985,624	**Copy B** **For Recipient**
	1f Accrued market discount $ 295,999	**1g** Wash sale loss disallowed $ 24,961,928	
RECIPIENT'S name	**2** Short-term gain or loss ☐ Long-term gain or loss ☐ Ordinary ☐	**3** If checked, basis reported to IRS ☐	
Street address (including apt. no.)	**4** Federal income tax withheld $ 102,708	**5** If checked, noncovered security ☐	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
City or town, state or province, country, and ZIP or foreign postal code	**6** Reported to IRS: Gross proceeds ☐ Net proceeds ☐	**7** If checked, loss is not allowed based on amount in 1d ☐	
Account number (see instructions)	**8** Profit or (loss) realized in 2018 on closed contracts $ 1,089,547	**9** Unrealized profit or (loss) on open contracts—12/31/2017 $ 206,515	
CUSIP number / FATCA filing requirement ☐	**10** Unrealized profit or (loss) on open contracts—12/31/2018 $ 117,346	**11** Aggregate profit or (loss) on contracts $ 1,115,827	
14 State name / **15** State identification no. / **16** State tax withheld $ / $	**12** Check if proceeds from collectibles ☐	**13** Bartering $ 13,330	

Form **1099-B** (Keep for your records) www.irs.gov/Form1099B Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 837,549**			OMB No. 1545-0877 2018 Form **1099-A**	**Acquisition or Abandonment of Secured Property**
LENDER'S TIN	BORROWER'S TIN	**1** Date of lender's acquisition or knowledge of abandonment	**2** Balance of principal outstanding $ **40,434,588**	**Copy B** **For Borrower**
BORROWER'S name		**3**	**4** Fair market value of property $ **47,221,404**	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
Street address (including apt. no.)		**5** If checked, the borrower was personally liable for repayment of the debt . . . . . ▶ ☐		
City or town, state or province, country, and ZIP or foreign postal code		**6** Description of property		
Account number (see instructions)				

Form **1099-A** (keep for your records) www.irs.gov/Form1099A Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 837,549**		OMB No. 1545-0877 **2018** Form **1099-A**
LENDER'S TIN	BORROWER'S TIN	**1** Date of lender's acquisition or knowledge of abandonment
		2 Balance of principal outstanding $ **826,474**
BORROWER'S name		**3**
		4 Fair market value of property $ **825,421**
Street address (including apt. no.)		**5** If checked, the borrower was personally liable for repayment of the debt . . . . . ▶ ☐
City or town, state or province, country, and ZIP or foreign postal code		**6** Description of property
Account number (see instructions)		

Acquisition or Abandonment of Secured Property

Copy B
For Borrower

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

Form **1099-A** (keep for your records) www.irs.gov/Form1099A Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 267,240**		OMB No. 1545-0877 **2018** Form **1099-A**	**Acquisition or Abandonment of Secured Property**
LENDER'S TIN	BORROWER'S TIN	**1** Date of lender's acquisition or knowledge of abandonment	**2** Balance of principal outstanding $ **261,188**
BORROWER'S name		**3**	**4** Fair market value of property $ **260,138**
Street address (including apt. no.)		**5** If checked, the borrower was personally liable for repayment of the debt . . . . . ▶ ☐	
City or town, state or province, country, and ZIP or foreign postal code		**6** Description of property	
Account number (see instructions)			

Copy B
For Borrower

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

Form **1099-A** (keep for your records) www.irs.gov/Form1099A Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 85,596,477**		***Caution:** The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB No. 1545-0901 **2018** Form **1098**
		1 Mortgage interest received from payer(s)/borrower(s)* $ **489,057,896**	
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	**2** Outstanding mortgage principal as of 1/1/2018 $ **11,226,000,000**	**3** Mortgage origination date
PAYER'S/BORROWER'S name		**4** Refund of overpaid interest $ **94,512**	**5** Mortgage insurance premiums $ **9,220,628**
		6 Points paid on purchase of principal residence $ **4,287,226**	
Street address (including apt. no.)		**7** ☐ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.	
City or town, state or province, country, and ZIP or foreign postal code		**8** Address or description of property securing mortgage (see instructions)	
9 Number of properties securing the mortgage	**10** Other		
Account number (see instructions)			

Mortgage Interest Statement

Copy B
For Payer/ Borrower

The information in boxes 1through 9 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 85,596,477**		***Caution:** The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB No. 1545-0901 **2018** Form **1098**	**Mortgage Interest Statement**
		1 Mortgage interest received from payer(s)/borrower(s)* $ **84,990,251**		**Copy B** **For Payer/ Borrower**
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	**2** Outstanding mortgage principal as of 1/1/2018 $ **70,187,135**	**3** Mortgage origination date	The information in boxes 1through 9 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
PAYER'S/BORROWER'S name		**4** Refund of overpaid interest $ **48,073**	**5** Mortgage insurance premiums $ **5,859,744**	
		6 Points paid on purchase of principal residence $ **1,823,144**		
Street address (including apt. no.)		**7** ☐ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.		
City or town, state or province, country, and ZIP or foreign postal code		**8** Address or description of property securing mortgage (see instructions)		
9 Number of properties securing the mortgage	**10** Other			
Account number (see instructions)				

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all individuals represented = 59,422,035**		***Caution:** The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB No. 1545-0901 **2018** Form **1098**	**Mortgage Interest Statement**
		1 Mortgage interest received from payer(s)/borrower(s)* $ **59,113,569**		**Copy B** **For Payer/ Borrower**
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	**2** Outstanding mortgage principal as of 1/1/2018 $ **55,015,515**	**3** Mortgage origination date	The information in boxes 1through 9 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.
PAYER'S/BORROWER'S name		**4** Refund of overpaid interest $ **45,827**	**5** Mortgage insurance premiums $ **5,537,911**	
		6 Points paid on purchase of principal residence $ **1,784,412**		
Street address (including apt. no.)		**7** ☐ If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.		
City or town, state or province, country, and ZIP or foreign postal code		**8** Address or description of property securing mortgage (see instructions)		
9 Number of properties securing the mortgage	**10** Other			
Account number (see instructions)				

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Payments received for qualified tuition and related expenses	OMB No. 1545-1574	**Tuition Statement**
Total of all forms filed = 28,896,975		$ 251,108,119	2018	
		2	Form **1098-T**	
FILER'S employer identification no.	STUDENT'S TIN	3 If this box is checked, your educational institution changed its reporting method for 2018 ☐		**Copy B For Student**
STUDENT'S name		4 Adjustments made for a prior year $ 2,360,888	5 Scholarships or grants $ 121,001,380	This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year $ 770,695	7 Checked if the amount in box 1 includes amounts for an academic period beginning January—March 2019 ☐	
City or town, state or province, country, and ZIP or foreign postal code				
Service Provider/Acct. No. (see instr.)	8 Check if at least half-time student ☐	9 Checked if a graduate student ☐	10 Ins. contract reimb./refund $ 33,771	

Form **1098-T** (keep for your records) www.irs.gov/Form1098T Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 28,896,975**		**1** Payments received for qualified tuition and related expenses $ 26,763,623	OMB No. 1545-1574 **2018** Form **1098-T**	**Tuition Statement**
		2		
FILER'S employer identification no.	STUDENT'S TIN	**3** If this box is checked, your educational institution changed its reporting method for 2018 ☐		**Copy B** **For Student**
STUDENT'S name		**4** Adjustments made for a prior year $ 785,488	**5** Scholarships or grants $ 15,628,889	This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
Street address (including apt. no.)		**6** Adjustments to scholarships or grants for a prior year $ 468,933	**7** Checked if the amount in box 1 includes amounts for an academic period beginning January—March 2019 ☐	
City or town, state or province, country, and ZIP or foreign postal code				
Service Provider/Acct. No. (see instr.)	**8** Check if at least half-time student ☐	**9** Checked if a graduate student ☐	**10** Ins. contract reimb./refund $ 2,556	

Form **1098-T** (keep for your records) www.irs.gov/Form1098T Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Payments received for qualified tuition and related expenses	OMB No. 1545-1574	**Tuition Statement**
Total of all individuals represented = 26,201,770		$ 24,512,710	2018	
		2	Form **1098-T**	
FILER'S employer identification no.	STUDENT'S TIN	3 If this box is checked, your educational institution changed its reporting method for 2018 ☐		**Copy B For Student**
STUDENT'S name		4 Adjustments made for a prior year $ 784,435	5 Scholarships or grants $ 15,052,445	This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year $ 466,931	7 Checked if the amount in box 1 includes amounts for an academic period beginning January—March 2019 ☐	
City or town, state or province, country, and ZIP or foreign postal code				
Service Provider/Acct. No. (see instr.)	8 Check if at least half-time student ☐	9 Checked if a graduate student ☐	10 Ins. contract reimb./refund $ 2,556	

Form **1098-T** (keep for your records) www.irs.gov/Form1098T Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 25,562,870**			OMB No. 1545-1576 **2018** Form **1098-E**	**Student Loan Interest Statement**
RECIPIENT'S TIN	BORROWER'S TIN	**1** Student loan interest received by lender $ **43,663,747**		**Copy B** **For Borrower**
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
Account number (see instructions)		**2** If checked, box 1 does **not** include loan origination fees and/or capitalized interest for loans made before September 1, 2004 . . . . . ☐		

Form **1098-E** (keep for your records) www.irs.gov/Form1098E Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 25,562,870**			OMB No. 1545-1576 **2018** Form **1098-E**	**Student Loan Interest Statement**
RECIPIENT'S TIN	BORROWER'S TIN	**1** Student loan interest received by lender $ **25,504,019**		**Copy B** **For Borrower**
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
Account number (see instructions)		**2** If checked, box 1 does **not** include loan origination fees and/or capitalized interest for loans made before September 1, 2004 . . . . . ☐		

Form **1098-E** (keep for your records) www.irs.gov/Form1098E Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all individuals represented = 19,938,680**			OMB No. 1545-1576 **2018** Form **1098-E**	**Student Loan Interest Statement**
RECIPIENT'S TIN	BORROWER'S TIN	**1** Student loan interest received by lender $ **19,899,559**		**Copy B** **For Borrower**
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.
Account number (see instructions)		**2** If checked, box 1 does **not** include loan origination fees and/or capitalized interest for loans made before September 1, 2004 . . . . . ☐		

Form **1098-E** (keep for your records) www.irs.gov/Form1098E Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of identifiable event	OMB No. 1545-1424	**Cancellation of Debt**
Total of all forms filed = 4,268,775		2 Amount of debt discharged $ **35,915,587**	2018	
		3 Interest if included in box 2 $ **1,789,333**	Form **1099-C**	
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description		**Copy B For Debtor**
DEBTOR'S name				This is important tax information and is being furnished to the IRS. If you are required to file a 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.
Street address (including apt. no.)		5 If checked, the debtor was personally liable for repayment of the debt . . . . . ▶ ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)		6 Identifiable event code	7 Fair market value of property $ **22,101,979**	

Form **1099-C** (keep for your records) www.irs.gov/Form1099C Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of identifiable event	OMB No. 1545-1424	**Cancellation of Debt**
Total of all forms filed = 4,268,775		2 Amount of debt discharged $ **4,236,076**	2018	
		3 Interest if included in box 2 $ **529,505**	Form **1099-C**	
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description		**Copy B For Debtor**
DEBTOR'S name				This is important tax information and is being furnished to the IRS. If you are required to file a 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.
Street address (including apt. no.)		5 If checked, the debtor was personally liable for repayment of the debt . . . . . ▶ ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)		6 Identifiable event code	7 Fair market value of property $ **238,197**	

Form **1099-C** (keep for your records) www.irs.gov/Form1099C Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of identifiable event	OMB No. 1545-1424	**Cancellation of Debt**
Total of all individuals represented = 3,412,625		2 Amount of debt discharged $ **3,380,236**	2018	
		3 Interest if included in box 2 $ **504,653**	Form **1099-C**	
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description		**Copy B For Debtor**
DEBTOR'S name				This is important tax information and is being furnished to the IRS. If you are required to file a 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.
Street address (including apt. no.)		5 If checked, the debtor was personally liable for repayment of the debt . . . . . ▶ ☐		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)		6 Identifiable event code	7 Fair market value of property $ **230,995**	

Form **1099-C** (keep for your records) www.irs.gov/Form1099C Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation	OMB No. 1545-0120	**Certain Government Payments**
Total of all forms filed = 75,677,980		$ 30,849,671	2018	
		2 State or local income tax refunds, credits, or offsets $ 104,230,594	Form **1099-G**	
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 amount is for tax year	4 Federal income tax withheld $ 1,439,842	**Copy 1** **For State Tax Department**
RECIPIENT'S name		5 RTAA payments $ *	6 Taxable grants $ 1,508,701	
Street address (including apt. no.)		7 Agriculture payments $ 8,351,327	8 Check if box 2 is trade or business income ► ☐	
City or town, state or province, country, and ZIP or foreign postal code		9 Market gain $ 0		
Account number (see instructions)		10a State / 10b State identification no.	11 State income tax withheld $ / $	

Form **1099-G** www.irs.gov/Form1099G Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**
Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 75,677,980**	**1** Unemployment compensation $ 7,287,962	OMB No. 1545-0120 **2018** Form **1099-G**	**Certain Government Payments**
	2 State or local income tax refunds, credits, or offsets $ 67,483,065		
PAYER'S TIN / RECIPIENT'S TIN	**3** Box 2 amount is for tax year	**4** Federal income tax withheld $ 3,444,248	**Copy 1** **For State Tax Department**
RECIPIENT'S name	**5** RTAA payments $ *	**6** Taxable grants $ 115,367	
Street address (including apt. no.)	**7** Agriculture payments $ 617,296	**8** Check if box 2 is trade or business income ► ☐	
City or town, state or province, country, and ZIP or foreign postal code	**9** Market gain $ 0		
Account number (see instructions)	**10a** State / **10b** State identification no.	**11** State income tax withheld $ $	

Form **1099-G** www.irs.gov/Form1099G Department of the Treasury - Internal Revenue Service

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 68,650,512**	**1** Unemployment compensation $ 7,244,912	OMB No. 1545-0120 **2018** Form **1099-G**	**Certain Government Payments**
	2 State or local income tax refunds, credits, or offsets $ 63,574,807		
PAYER'S TIN / RECIPIENT'S TIN	**3** Box 2 amount is for tax year	**4** Federal income tax withheld $ 3,438,657	**Copy 1** **For State Tax Department**
RECIPIENT'S name	**5** RTAA payments $ *	**6** Taxable grants $ 113,790	
Street address (including apt. no.)	**7** Agriculture payments $ 613,252	**8** Check if box 2 is trade or business income ► ☐	
City or town, state or province, country, and ZIP or foreign postal code	**9** Market gain $ 0		
Account number (see instructions)	**10a** State / **10b** State identification no.	**11** State income tax withheld $ $	

Form **1099-G** www.irs.gov/Form1099G Department of the Treasury - Internal Revenue Service

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Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 93,707,192**	1a Total ordinary dividends $ 349,122,558	OMB No. 1545-0110 2018 Form **1099-DIV**	**Dividends and Distributions**
	1b Qualified dividends $ 271,189,792		
	2a Total capital gain distr. $ 123,405,066	2b Unrecap. Sec. 1250 gain $ 619,987	**Copy 1** **For State Tax Department**
PAYER'S TIN / RECIPIENT'S TIN	2c Section 1202 gain $ 243	2d Collectibles (28%) gain $ 14	
RECIPIENT'S name	3 Nondividend distributions $ 15,649,892	4 Federal income tax withheld $ 2,332,236	
	5 Section 199A dividends $ 7,309,100	6 Investment expenses $ 54,233	
Street address (including apt. no.)	7 Foreign tax paid $ 4,212,686	8 Foreign country or U.S. possession	
City or town, state or province, country, and ZIP or foreign postal code	9 Cash liquidation distributions $ 5,646,279	10 Noncash liquidation distributions $ 780,576	
FATCA filing requirement ☐	11 Exempt-interest dividends $ 25,991,674	12 Specified private activity bond interest dividends $ 1,838,109	
Account number (see instructions)	13 State / 14 State identification no.	15 State tax withheld $ $	

Form **1099-DIV** www.irs.gov/Form1099DIV Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 93,707,192**	**1a** Total ordinary dividends $ 85,863,941	OMB No. 1545-0110 **2018** Form **1099-DIV**	**Dividends and Distributions**
	1b Qualified dividends $ 76,796,284		
	2a Total capital gain distr. $ 31,892,266	**2b** Unrecap. Sec. 1250 gain $ 3,262,435	**Copy 1** **For State Tax Department**
PAYER'S TIN / RECIPIENT'S TIN	**2c** Section 1202 gain $ 169	**2d** Collectibles (28%) gain $ 1,352	
RECIPIENT'S name	**3** Nondividend distributions $ 10,546,712	**4** Federal income tax withheld $ 1,697,319	
	5 Section 199A dividends $ 8,434,914	**6** Investment expenses $ 283,843	
Street address (including apt. no.)	**7** Foreign tax paid $ 19,783,517	**8** Foreign country or U.S. possession	
City or town, state or province, country, and ZIP or foreign postal code	**9** Cash liquidation distributions $ 250,811	**10** Noncash liquidation distributions $ 8,604	
FATCA filing requirement ☐	**11** Exempt-interest dividends $ 8,729,886	**12** Specified private activity bond interest dividends $ 6,038,926	
Account number (see instructions)	**13** State / **14** State identification no.	**15** State tax withheld $ $	

Form **1099-DIV** www.irs.gov/Form1099DIV Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 50,277,455**	1a Total ordinary dividends $ 48,362,424	OMB No. 1545-0110 2018 Form **1099-DIV**	**Dividends and Distributions**
	1b Qualified dividends $ 45,406,223		
	2a Total capital gain distr. $ 21,789,447	2b Unrecap. Sec. 1250 gain $ 2,833,460	**Copy 1** **For State Tax Department**
PAYER'S TIN / RECIPIENT'S TIN	2c Section 1202 gain $ 169	2d Collectibles (28%) gain $ 1,346	
RECIPIENT'S name	3 Nondividend distributions $ 8,402,883	4 Federal income tax withheld $ 1,465,186	
	5 Section 199A dividends $ 6,711,062	6 Investment expenses $ 264,849	
Street address (including apt. no.)	7 Foreign tax paid $ 15,170,123	8 Foreign country or U.S. possession	
City or town, state or province, country, and ZIP or foreign postal code	9 Cash liquidation distributions $ 222,730	10 Noncash liquidation distributions $ 8,354	
FATCA filing requirement ☐	11 Exempt-interest dividends $ 6,954,422	12 Specified private activity bond interest dividends $ 5,001,916	
Account number (see instructions)	13 State / 14 State identification no.	15 State tax withheld $ $	

Form **1099-DIV** www.irs.gov/Form1099DIV Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 154,875,107**	Payer's RTN (optional)	OMB No. 1545-0112 **2018** Form **1099-INT**	**Interest Income**
	1 Interest income $ 73,927,156		
	2 Early withdrawal penalty $ 218,945		**Copy B** **For Recipient**
PAYER'S TIN / RECIPIENT'S TIN	3 Interest on U.S. Savings Bonds and Treas. obligations $ 12,300,582		
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code	4 Federal income tax withheld $ 38,907	5 Investment expenses $ 9,912,576	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
	6 Foreign tax paid $ 91,943	7 Foreign country or U.S. possession	
	8 Tax-exempt interest $ 74,665,811	9 Specified private activity bond interest $ 495,763	
	10 Market discount $ 5,360	11 Bond premium $ 853,861	
FATCA filing requirement ☐	12 Bond premium on Treasury obligations $ 248,095	13 Bond premium on tax-exempt bond $ 24,122,386	
Account number (see instructions)	14 Tax-exempt and tax credit bond CUSIP no.	15 State / 16 State identification no.	17 State tax withheld $ $

Form **1099-INT** (keep for your records) www.irs.gov/Form1099INT Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of forms filed for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. **Total of all forms filed = 154,875,107**	Payer's RTN (optional)	OMB No. 1545-0112 **2018** Form **1099-INT**	**Interest Income**
	1 Interest income $ 133,010,005		
	2 Early withdrawal penalty $ 1,325,768		**Copy B** **For Recipient**
PAYER'S TIN / RECIPIENT'S TIN	3 Interest on U.S. Savings Bonds and Treas. obligations $ 4,098,354		
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code	4 Federal income tax withheld $ 1,058,098	5 Investment expenses $ 174,468	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
	6 Foreign tax paid $ 48,192	7 Foreign country or U.S. possession	
	8 Tax-exempt interest $ 5,792,147	9 Specified private activity bond interest $ 229,944	
	10 Market discount $ 9,953	11 Bond premium $ 820,945	
FATCA filing requirement ☐	12 Bond premium on Treasury obligations $ 145,842	13 Bond premium on tax-exempt bond $ 1,509,476	
Account number (see instructions)	14 Tax-exempt and tax credit bond CUSIP no.	15 State / 16 State identification no.	17 State tax withheld $ $

Form **1099-INT** (keep for your records) www.irs.gov/Form1099INT Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	Payer's RTN (optional)	OMB No. 1545-0112	**Interest Income**
Total of all individuals represented =79,603,805	1 Interest income $ 74,859,062	2018 Form **1099-INT**	
	2 Early withdrawal penalty $ 1,089,665		**Copy B**
PAYER'S TIN / RECIPIENT'S TIN	3 Interest on U.S. Savings Bonds and Treas. obligations $ 2,884,785		**For Recipient**
RECIPIENT'S name	4 Federal income tax withheld $ 949,058	5 Investment expenses $ 165,993	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)	6 Foreign tax paid $ 45,908	7 Foreign country or U.S. possession	
City or town, state or province, country, and ZIP or foreign postal code	8 Tax-exempt interest $ 2,404,260	9 Specified private activity bond interest $ 206,342	
	10 Market discount $ 9,550	11 Bond premium $ 759,298	
FATCA filing requirement ☐	12 Bond premium on Treasury obligations $ 137,508	13 Bond premium on tax-exempt bond $ 1,316,995	
Account number (see instructions)	14 Tax-exempt and tax credit bond CUSIP no.	15 State / 16 State identification no.	17 State tax withheld $ / $

Form **1099-INT** (keep for your records) www.irs.gov/Form1099INT Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Gross long-term care benefits paid	OMB No. 1545-1519	**Long-Term Care and Accelerated Death Benefits**
Total of all forms filed = 328,699		$ 10,611,786	2018	
		2 Accelerated death benefits paid	Form **1099-LTC**	
PAYER'S TIN	POLICYHOLDER'S TIN	$ *	INSURED'S TIN	**Copy B For Policyholder**
POLICYHOLDER'S name		3 ☐ Per diem ☐ Reimbursed amount		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
Street address (including apt. no.)		INSURED'S name		
City or town, state or province, country, and ZIP or foreign postal code		Street address (including apt. no.)		
		City or town, state or province, country, and ZIP or foreign postal code		
Account number (see instructions)	4 Qualified contract ☐ (optional)	5 (optional) ☐ Chronically ill ☐ Terminally ill	Date certified	

Form **1099-LTC** (keep for your records) www.irs.gov/Form1099LTC Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	1 Gross long-term care benefits paid	OMB No. 1545-1519	**Long-Term Care and Accelerated Death Benefits**
Total of all forms filed = 328,699	$ 325,272	2018	
	2 Accelerated death benefits paid $ *	Form **1099-LTC**	
PAYER'S TIN / POLICYHOLDER'S TIN	3 ☐ Per diem ☐ Reimbursed amount	INSURED'S TIN	**Copy B For Policyholder** This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
POLICYHOLDER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code	INSURED'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		
Account number (see instructions) / 4 Qualified contract ☐ (optional)	5 (optional) ☐ Chronically ill ☐ Terminally ill	Date certified	

Form **1099-LTC** (keep for your records) www.irs.gov/Form1099LTC Department of the Treasury - Internal Revenue Service

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.	1 Gross long-term care benefits paid	OMB No. 1545-1519	
Total of all individuals represented = 314,931	$ 311,505	2018	**Long-Term Care and Accelerated Death Benefits**
	2 Accelerated death benefits paid	Form **1099-LTC**	
PAYER'S TIN / POLICYHOLDER'S TIN	$ *	INSURED'S TIN	**Copy B For Policyholder**
POLICYHOLDER'S name	3 ☐ Per diem ☐ Reimbursed amount		This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.
Street address (including apt. no.)	INSURED'S name		
City or town, state or province, country, and ZIP or foreign postal code	Street address (including apt. no.)		
	City or town, state or province, country, and ZIP or foreign postal code		
Account number (see instructions) / 4 Qualified contract ☐ (optional)	5 (optional) ☐ Chronically ill ☐ Terminally ill	Date certified	

Form **1099-LTC** (keep for your records) www.irs.gov/Form1099LTC Department of the Treasury - Internal Revenue Service

*** Data not shown because of the small number of sample returns on which it is based.**

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 13,994,386**			OMB No. 1545-1517 **2018** Form **1099-SA**	**Distributions From an HSA, Archer MSA, or Medicare Advantage MSA**
PAYER'S TIN	RECIPIENT'S TIN	**1** Gross distribution $ **27,019,229**	**2** Earnings on excess cont. $ **2,083**	**Copy B** **For Recipient**
RECIPIENT'S name		**3** Distribution code	**4** FMV on date of death $ **10,600**	
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**5** HSA ☐ Archer MSA ☐ MA MSA ☐		This information is being furnished to the IRS.
Account number (see instructions)				

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all forms filed = 13,994,386**			OMB No. 1545-1517 **2018** Form **1099-SA**	**Distributions From an HSA, Archer MSA, or Medicare Advantage MSA**
PAYER'S TIN	RECIPIENT'S TIN	**1** Gross distribution $ 13,953,862	**2** Earnings on excess cont. $ 14,892	**Copy B** **For Recipient**
RECIPIENT'S name		**3** Distribution code	**4** FMV on date of death $ 6,374	
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**5** HSA ☐ Archer MSA ☐ MA MSA ☐		This information is being furnished to the IRS.
Account number (see instructions)				

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number **Total of all individuals represented = 13,172,205**			OMB No. 1545-1517 **2018** Form **1099-SA**	**Distributions From an HSA, Archer MSA, or Medicare Advantage MSA**
PAYER'S TIN	RECIPIENT'S TIN	**1** Gross distribution $ 13,142,024	**2** Earnings on excess cont. $ 14,892	**Copy B** **For Recipient**
RECIPIENT'S name		**3** Distribution code	**4** FMV on date of death $ 6,374	
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		**5** HSA ☐ Archer MSA ☐ MA MSA ☐		This information is being furnished to the IRS.
Account number (see instructions)				

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

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	OMB No. 1545-0115	
Total of all forms filed = 54,485,399		$ 114,099,020	2018	**Miscellaneous Income**
		2 Royalties $ 39,268,031	Form **1099-MISC**	
		3 Other income $ 38,858,950	4 Federal income tax withheld $ 1,305,915	**Copy B For Recipient**
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing boat proceeds $ 859,479	6 Medical and health care payments $ 14,337,248	
RECIPIENT'S name		7 Nonemployee compensation $ 707,660,068	8 Substitute payments in lieu of dividends or interest $ 312,487	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)		9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $ 4,247,967	
City or town, state or province, country, and ZIP or foreign postal code		11	12	
Account number (see instructions)	FATCA filing requirement ☐	13 Excess golden parachute payments $ 12,789	14 Gross proceeds paid to an attorney $ 47,076,156	
15a Section 409A deferrals $ 30,210	15b Section 409A income $ 12,969	16 State tax withheld $ $	17 State/Payer's state no.	18 State income $ $

Form **1099-MISC** (keep for your records) www.irs.gov/Form1099MISC Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected lines

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	OMB No. 1545-0115	
Total of all forms filed = 54,485,399		$ 5,090,674	2018	**Miscellaneous Income**
		2 Royalties $ 4,822,032	Form **1099-MISC**	
		3 Other income $ 4,645,641	4 Federal income tax withheld $ 345,341	**Copy B For Recipient**
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing boat proceeds $ 55,301	6 Medical and health care payments $ 1,196,874	
RECIPIENT'S name		7 Nonemployee compensation $ 37,290,860	8 Substitute payments in lieu of dividends or interest $ 300,292	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)		9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $ 181,549	
City or town, state or province, country, and ZIP or foreign postal code		11	12	
Account number (see instructions)	FATCA filing requirement ☐	13 Excess golden parachute payments $ 3,335	14 Gross proceeds paid to an attorney $ 155,056	
15a Section 409A deferrals $ 51,951	15b Section 409A income $ 26,626	16 State tax withheld $ / $	17 State/Payer's state no.	18 State income $ / $

Form **1099-MISC** (keep for your records) www.irs.gov/Form1099MISC Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	OMB No. 1545-0115	
Total of all individuals represented = 34,702,227		$ 4,099,013	2018	**Miscellaneous Income**
		2 Royalties $ 3,025,600	Form **1099-MISC**	
		3 Other income $ 4,234,594	4 Federal income tax withheld $ 334,226	**Copy B For Recipient**
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing boat proceeds $ 48,360	6 Medical and health care payments $ 414,638	
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		7 Nonemployee compensation $ 24,869,313	8 Substitute payments in lieu of dividends or interest $ 286,894	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ▶ ☐	10 Crop insurance proceeds $ 175,133	
		11	12	
Account number (see instructions)	FATCA filing requirement ☐	13 Excess golden parachute payments $ 3,331	14 Gross proceeds paid to an attorney $ 101,508	
15a Section 409A deferrals $ 50,536	15b Section 409A income $ 26,598	16 State tax withheld $ $	17 State/Payer's state no.	18 State income $ $

Form **1099-MISC** (keep for your records) www.irs.gov/Form1099MISC Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Patronage dividends $ 2,543,718	OMB No. 1545-0118 2018 Form 1099-PATR	**Taxable Distributions Received From Cooperatives**
Total of all forms filed = 1,309,386		2 Nonpatronage distributions $ 1,427		
		3 Per-unit retain allocations $ 52,461,980		
PAYER'S TIN	RECIPIENT'S TIN	4 Federal income tax withheld $ 1,448		**Copy B For Recipient**
RECIPIENT'S name		5 Redemption of nonqualified notices and retain allocations $ 200,750	6 Domestic production activities deduction $ 577,749	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)			7 Investment credit $ 1,457	
City or town, state or province, country, and ZIP or foreign postal code		8 Work opportunity credit $ 28	9 Patron's AMT adjustment $ *	
Account number (see instructions)		10 Other credits and deductions $ 3,970		

Form **1099-PATR** (keep for your records) www.irs.gov/Form1099PATR Department of the Treasury - Internal Revenue Service

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Patronage dividends $ 1,094,970	OMB No. 1545-0118 2018 Form 1099-PATR	**Taxable Distributions Received From Cooperatives**
Total of all forms filed = 1,309,386		2 Nonpatronage distributions $ 1,262		
		3 Per-unit retain allocations $ 273,436		
PAYER'S TIN	RECIPIENT'S TIN	4 Federal income tax withheld $ 9,600		**Copy B For Recipient**
RECIPIENT'S name		5 Redemption of nonqualified notices and retain allocations $ 93,992	6 Domestic production activities deduction $ 203,023	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)			7 Investment credit $ 404	
City or town, state or province, country, and ZIP or foreign postal code		8 Work opportunity credit $ 236	9 Patron's AMT adjustment $ *	
Account number (see instructions)		10 Other credits and deductions $ 515		

Form **1099-PATR** (keep for your records) www.irs.gov/Form1099PATR Department of the Treasury - Internal Revenue Service

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Patronage dividends $ 884,359	OMB No. 1545-0118 2018 Form 1099-PATR	**Taxable Distributions Received From Cooperatives**
Total of all individuals represented = 1,001,156		2 Nonpatronage distributions $ 1,262		
		3 Per-unit retain allocations $ 236,012		
PAYER'S TIN	RECIPIENT'S TIN	4 Federal income tax withheld $ 9,234		**Copy B For Recipient**
RECIPIENT'S name		5 Redemption of nonqualified notices and retain allocations $ 91,342	6 Domestic production activities deduction $ 181,115	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Street address (including apt. no.)			7 Investment credit $ 404	
City or town, state or province, country, and ZIP or foreign postal code		8 Work opportunity credit $ 224	9 Patron's AMT adjustment $ *	
Account number (see instructions)		10 Other credits and deductions $ 497		

Form **1099-PATR** (keep for your records) www.irs.gov/Form1099PATR Department of the Treasury - Internal Revenue Service

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2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no. **Total of all forms filed = 104,706,435**		1 Gross distribution $ 2,066,000,000 2a Taxable amount $ 1,173,100,000	OMB No. 1545-0119 2018 Form 1099-R	**Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**
		2b Taxable amount not determined ☐	Total distribution ☐	**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.**
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) $ 124,335	4 Federal income tax withheld $ 132,117,319	
RECIPIENT'S name		5 Employee contributions/ Designated Roth contributions or insurance premiums $	6 Net unrealized appreciation in employer's securities $ 2,995,540	
Street address (including apt. no.)		7 Distribution code(s) IRA/ SEP/ SIMPLE ☐	8 Other $ 2,573,382 %	This information is being furnished to the IRS.
City or town, state or province, country, and ZIP or foreign postal code		9a Your percentage of total distribution %	9b Total employee contributions $ 107,920,605	
10 Amount allocable to IRR within 5 years $ 27,361	11 1st year of desig. Roth contrib.	FATCA filing requirement ☐	12 State tax withheld $ $	13 State/Payer's state no.	14 State distribution $ $
Account number (see instructions)		Date of payment	15 Local tax withheld $ $	16 Name of locality	17 Local distribution $ $

Form **1099-R** www.irs.gov/Form1099R Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of forms filed for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.		1 Gross distribution $ 104,393,162	OMB No. 1545-0119 2018 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
Total of all forms filed = 104,706,435		2a Taxable amount $ 87,681,300		
		2b Taxable amount not determined ☐	Total distribution ☐	**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.**
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) $ 41,076	4 Federal income tax withheld $ 53,239,047	
RECIPIENT'S name		5 Employee contributions/ Designated Roth contributions or insurance premiums $	6 Net unrealized appreciation in employer's securities $ 38,965	
Street address (including apt. no.)		7 Distribution code(s) IRA/ SEP/ SIMPLE ☐	8 Other $ 603,630 %	This information is being furnished to the IRS.
City or town, state or province, country, and ZIP or foreign postal code		9a Your percentage of total distribution %	9b Total employee contributions $ 2,798,295	
10 Amount allocable to IRR within 5 years $ 3,301	11 1st year of desig. Roth contrib.	FATCA filing requirement ☐	12 State tax withheld $ $	13 State/Payer's state no.	14 State distribution $ $
Account number (see instructions)		Date of payment	15 Local tax withheld $ $	16 Name of locality	17 Local distribution $ $

Form **1099-R** www.irs.gov/Form1099R Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.

2018 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and phone no.		1 Gross distribution $ 61,058,223	OMB No. 1545-0119 2018 Form 1099-R	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
Total of all individuals represented = 61,189,726		2a Taxable amount $ 53,904,521		
		2b Taxable amount not determined ☐	Total distribution ☐	**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.**
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) $ 34,010	4 Federal income tax withheld $ 36,444,718	
RECIPIENT'S name		5 Employee contributions/ Designated Roth contributions or insurance premiums $	6 Net unrealized appreciation in employer's securities $ 37,657	
Street address (including apt. no.)		7 Distribution code(s) IRA/ SEP/ SIMPLE ☐	8 Other $ 576,635 %	This information is being furnished to the IRS.
City or town, state or province, country, and ZIP or foreign postal code		9a Your percentage of total distribution %	9b Total employee contributions $ 2,779,168	
10 Amount allocable to IRR within 5 years $ 3,301	11 1st year of desig. Roth contrib.	FATCA filing requirement ☐	12 State tax withheld $ $	13 State/Payer's state no.	14 State distribution $ $
Account number (see instructions)		Date of payment	15 Local tax withheld $ $	16 Name of locality	17 Local distribution $ $

Form **1099-R** www.irs.gov/Form1099R Department of the Treasury - Internal Revenue Service

Estimates exclude duplicates and returns replaced by amendeds.