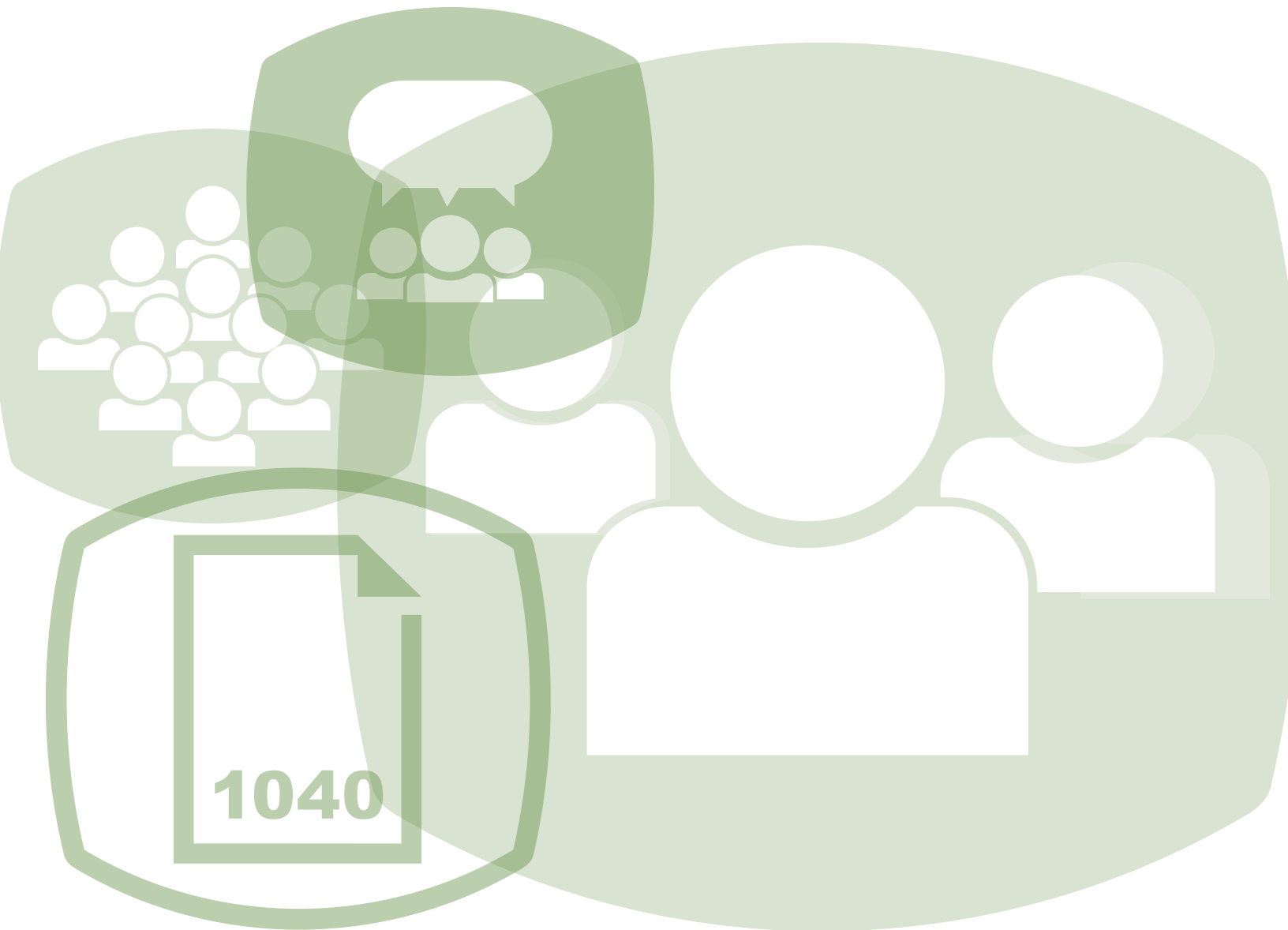




Statistics of Income

Individual Information Returns Line Item Estimates

2021



www.irs.gov/statistics

2021 Individual Information Returns, Line Item Estimates

(Rev. 6-2024)

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IRS Commissioner

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This 2021 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 2021 Individual SOI complete report weighted file. The estimates presented here are based on returns filed in Processing Year 2022 that were sampled statistically and then weighted to estimate the entire 2021 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--2021
Individual Information Returns
Line Item Estimates
Internal Revenue Service
Washington, D.C.

Description of the Sample for the Line Item Estimates

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

Domain of Study

The statistics in this report are estimates from a probability sample of Individual Information Returns, filed by third parties about certain business and money transactions on behalf of U.S. citizens and residents selected for inclusion in the sample of unaudited Individual Income Tax Returns, Form 1040 (including electronic returns) filed during Calendar Year 2022, being reported as a dependent on a selected Tax Return, or if the citizen or resident for which the information return was filed possesses certain combinations of the four ending digits of the social security number (SSN) but no Tax Return was filed. To avoid double counting, information returns associated with dependent tax returns were excluded because they were instead included in association with their parents returns.

All returns processed during 2022 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 2021. While most of the returns processed during Calendar Year 2022 were filed for Tax Year 2021, a small portion of returns were for prior years.

Sample Design and Selection

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

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

Tax data processed to the IRS Individual Master File at the Enterprise Computing Center at Martinsburg during Calendar Year 2022 were used to assign each taxpayer's record to the appropriate stratum and to determine whether the record should be included in the sample. Records are selected for the sample either if they possess certain combinations of the four ending digits of their Social Security number (SSN), or if their five ending digits of an eleven-digit number generated by a mathematical transformation of the SSN is less than or equal to the stratum sampling rate times 100,000.

The portion of the sample covering those with no filed tax return is designed as a simple random sample of recipients of information returns possessing certain combinations of the four ending digits of the 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 returns in a stratum by the number of sampled returns for that stratum. The weights were adjusted to

correct for misclassified returns and were then applied to the sample data to produce all the estimates in this report.

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

Sampling Variability

The sample used in this study is one of a large number of samples that could have been selected using the same sample design. The estimates calculated from these different samples would vary. The standard error 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.

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of Forms filed for selected line
 VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all forms filed = 3,553,301		FILER'S TIN		OMB No. 1545-2205		2021 Form 1099-K	Payment Card and Third Party Network Transactions		
		PAYEE'S TIN							
		1a Gross amount of payment card/third party network transactions \$ 3,517,404							
		1b Card Not Present transactions \$ 2,164,377		2 Merchant category code					
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		Check to indicate transactions reported are: Payment card <input type="checkbox"/> Third party network <input type="checkbox"/>		3 Number of payment transactions		4 Federal income tax withheld \$ 20,304		Copy 1 For State Tax Department	
PAYEE'S name		5a January \$ 2,178,076		5b February \$ 2,240,366					
		5c March \$ 2,380,883		5d April \$ 2,439,253					
Street address (including apt. no.)		5e May \$ 2,482,870		5f June \$ 2,522,396					
		5g July \$ 2,569,068		5h August \$ 2,581,686					
City or town, state or province, country, and ZIP or foreign postal code		5i September \$ 2,617,953		5j October \$ 2,637,713					
		5k November \$ 2,590,784		5l December \$ 2,574,722					
PSE'S name and telephone number		6 State		7 State identification no.		8 State income tax withheld \$			
Account number (see instructions)		-----		-----		-----			
						\$			

Form **1099-K**

www.irs.gov/Form1099K

Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of individuals for selected line

VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Total of all individuals represented = 2,887,505		FILER'S TIN	OMB No. 1545-2205		2021 Form 1099-K	Payment Card and Third Party Network Transactions	
		PAYEE'S TIN					
		1a Gross amount of payment card/third party network transactions \$ 2,879,059	2 Merchant category code				
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		Check to indicate transactions reported are: Payment card <input type="checkbox"/> Third party network <input type="checkbox"/>		1b Card Not Present transactions \$ 1,769,248	3 Number of payment transactions	4 Federal income tax withheld \$ 20,292	Copy 1 For State Tax Department
PAYEE'S name		5a January \$ 1,883,156	5b February \$ 1,935,237				
Street address (including apt. no.)		5c March \$ 2,036,512	5d April \$ 2,096,216				
City or town, state or province, country, and ZIP or foreign postal code		5e May \$ 2,140,763	5f June \$ 2,172,926				
PSE'S name and telephone number		5g July \$ 2,213,692	5h August \$ 2,206,799				
		5i September \$ 2,236,880	5j October \$ 2,263,629				
		5k November \$ 2,204,680	5l December \$ 2,191,462				
Account number (see instructions)		6 State	7 State identification no.	8 State income tax withheld \$ \$			

Form **1099-K**

www.irs.gov/Form1099K

Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)

VOID CORRECTED

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. <p style="text-align: center;">Total of all forms filed = 3,553,301</p>		FILER'S TIN		OMB No. 1545-2205		2021 Form 1099-K	Payment Card and Third Party Network Transactions		
		PAYEE'S TIN							
		1a Gross amount of payment card/third party network transactions \$ 238,529,378		2 Merchant category code					
		1b Card Not Present transactions \$ 80,164,453							
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		Check to indicate transactions reported are: Payment card <input type="checkbox"/> Third party network <input type="checkbox"/>		3 Number of payment transactions		4 Federal income tax withheld \$ 128,362		Copy 1 For State Tax Department	
PAYEE'S name		5a January \$ 15,624,120		5b February \$ 15,369,417					
		5c March \$ 20,222,574		5d April \$ 20,415,400					
Street address (including apt. no.)		5e May \$ 22,288,683		5f June \$ 20,260,767					
		5g July \$ 20,449,358		5h August \$ 20,855,536					
City or town, state or province, country, and ZIP or foreign postal code		5i September \$ 20,592,153		5j October \$ 20,593,639					
		5k November \$ 20,037,451		5l December \$ 21,810,332					
PSE'S name and telephone number		6 State		7 State identification no.		8 State income tax withheld \$			
						\$			
Account number (see instructions)									

Form **1099-K**

www.irs.gov/Form1099K

Department of the Treasury - Internal Revenue Service

**2021 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		2 Federal income tax withheld		
			276,388,660		224,331,565		
c Employer's name, address, and ZIP code Total of all forms filed = 277,981,454			3 Social security wages		4 Social security tax withheld		
			265,301,741		263,637,636		
			5 Medicare wages and tips		6 Medicare tax withheld		
			271,591,513		266,312,754		
			7 Social security tips		8 Allocated tips		
			12,620,946		55,898		
d Control number			9		10 Dependent care benefits		
					1,853,367		
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans	
						12a C, D E, F 73,363,918	
				13 Statutory employee Retirement plan Third-party sick pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		12b AA 10,205,620	
				14 Other		12c DD 76,633,581	
						12d W 15,741,068	
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
Copy 1—For State, City, or Local Tax Department

2021

Department of the Treasury—Internal Revenue Service

**2021 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 183,353,956	2 Federal income tax withheld 165,827,831		
c Employer's name, address, and ZIP code Total of all individuals represented = 183,836,567			3 Social security wages 176,700,487	4 Social security tax withheld 176,180,670		
			5 Medicare wages and tips 180,971,933	6 Medicare tax withheld 179,827,680		
			7 Social security tips 10,479,941	8 Allocated tips 55,898		
d Control number			9	10 Dependent care benefits 1,778,045		
e Employee's first name and initial		Last name	Suff.	11 Nonqualified plans	12a C o d e s "D", "E", "F"	68,227,771
				13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b C o d e s "AA"	9,764,940
				14 Other	12c C o d e s "DD"	70,880,936
					12d C o d e s "W"	15,031,703
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
Copy 1—For State, City, or Local Tax Department

2021

Department of the Treasury—Internal Revenue Service

**2021 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 9,920,000,000		2 Federal income tax withheld 1,390,000,000				
c Employer's name, address, and ZIP code Total of all forms filed = 277,981,454			3 Social security wages 8,150,000,000		4 Social security tax withheld 508,628,000				
			5 Medicare wages and tips 10,300,000,000		6 Medicare tax withheld 160,565,000				
			7 Social security tips 55,897,014		8 Allocated tips 100,331				
d Control number			9		10 Dependent care benefits 5,882,533				
e Employee's first name and initial		Last name		Suff.		11 Nonqualified plans		12a "C", "D" "E", "F"	389,734,865
						13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>		12b "AA"	45,230,064
						14 Other		12c "DD"	762,221,000
								12d "W"	37,610,915
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
Copy 1—For State, City, or Local Tax Department

2021

Department of the Treasury—Internal Revenue Service

2021 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 = 404,887		1 Date option granted	OMB No. 1545-2129	Form 3921 (Rev. October 2017)	Exercise of an Incentive Stock Option Under Section 422(b)
		2 Date option exercised			
TRANSFEROR'S TIN	EMPLOYEE'S TIN	3 Exercise price per share	4 Fair market value per share on exercise date	Copy B For Employee This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.	
EMPLOYEE'S name		\$ 321,176	\$ 372,741		
Street address (including apt. no.)		5 No. of shares transferred			
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

2021 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 = 141,228		1 Date option granted	OMB No. 1545-2129	Form 3921 (Rev. October 2017)	Exercise of an Incentive Stock Option Under Section 422(b)
		2 Date option exercised			
TRANSFEROR'S TIN	EMPLOYEE'S TIN	3 Exercise price per share	4 Fair market value per share on exercise date	Copy B For Employee This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.	
EMPLOYEE'S name		\$ 110,773	\$ 128,263		
Street address (including apt. no.)		5 No. of shares transferred			
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

2021 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		1 Date option granted	OMB No. 1545-2129	Form 3921 (Rev. October 2017)	Exercise of an Incentive Stock Option Under Section 422(b)
Total of all forms filed = 404,887		2 Date option exercised			
TRANSFEROR'S TIN	EMPLOYEE'S TIN	3 Exercise price per share	4 Fair market value per share on exercise date	Copy B For Employee This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.	
EMPLOYEE'S name		\$ 8,458	\$ 43,288		
Street address (including apt. no.)		5 No. of shares transferred			
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)

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Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Number of Forms filed for selected line

2626

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CORPORATION'S name, street address, city or town, state or province, country, and ZIP or foreign postal code Total of all forms filed = 6,407,367		1 Date option granted	OMB No. 1545-2129	Form 3922 (Rev. September 2016)	Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c) Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current version of the General Instructions for Certain Information Returns.
		2 Date option exercised			
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per share on exercise date		
EMPLOYEE'S name		\$ 6,407,317	\$ 6,406,657		
		5 Exercise price paid per share	6 No. of shares transferred		
		\$ 6,406,575			
Street address (including apt. no.)		7 Date legal title transferred			
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			
Account number (see instructions)		\$ 6,133,809			

Form **3922** (Rev. 9-2016)

Cat. No. 41180P

www.irs.gov/form3922

Department of the Treasury - Internal Revenue Service

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2021 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 = 2,193,363		1 Date option granted	OMB No. 1545-2129	Form 3922 (Rev. September 2016)	Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c) Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current version of the General Instructions for Certain Information Returns.
		2 Date option exercised			
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per share on exercise date		
EMPLOYEE'S name		\$ 2,193,355	\$ 2,193,004		
		5 Exercise price paid per share	6 No. of shares transferred		
		\$ 2,192,912			
Street address (including apt. no.)		7 Date legal title transferred			
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			
Account number (see instructions)		\$ 2,145,209			

Form **3922** (Rev. 9-2016)

Cat. No. 41180P

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Department of the Treasury - Internal Revenue Service

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2021 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 = 6,407,367		1 Date option granted	OMB No. 1545-2129	Form 3922 (Rev. September 2016)	Transfer of Stock Acquired Through an Employee Stock Purchase Plan Under Section 423(c) Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current version of the General Instructions for Certain Information Returns.
		2 Date option exercised			
CORPORATION'S federal identification number	EMPLOYEE'S identification number	3 Fair market value per share on grant date	4 Fair market value per share on exercise date		
EMPLOYEE'S name		\$ 893,637	\$ 986,055	5 Exercise price paid per share	
Street address (including apt. no.)		\$ 808,307		6 No. of shares transferred	
City or town, state or province, country, and ZIP or foreign postal code		7 Date legal title transferred			
Account number (see instructions)		8 Exercise price per share determined as if the option was exercised on the date shown in box 1			
		\$	762,075		

Form **3922** (Rev. 9-2016)

Cat. No. 41180P

www.irs.gov/form3922

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

2727

Number of Forms filed for selected line
 VOID CORRECTED

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Employee or self-employed person's Archer MSA contributions made in 2021 and 2022 for 2021	OMB No. 1545-1518	2021	HSA, Archer MSA, or Medicare Advantage MSA Information
Total of all forms filed = 26,074,010		\$ 1,085			
		2 Total contributions made in 2021			
		\$ 17,408,777	Form 5498-SA		
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2022 for 2021			Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2021 General Instructions for Certain Information Returns.
		\$ 2,419,461			
PARTICIPANT'S name		4 Rollover contributions	5 Fair market value of HSA, Archer MSA, or MA MSA		
		\$ 18,535	\$ 22,317,847		
Street address (including apt. no.)		6 HSA <input type="checkbox"/>			
City or town, state or province, country, and ZIP or foreign postal code		Archer MSA <input type="checkbox"/>			
Account number (see instructions)		MA <input type="checkbox"/>			
		MSA <input type="checkbox"/>			

Form 5498-SA

Cat. No. 38467V

www.irs.gov/Form5498SA

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

2727 VOID CORRECTED
Number of individuals for selected line

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		1 Employee or self-employed person's Archer MSA contributions made in 2021 and 2022 for 2021	OMB No. 1545-1518	2021	HSA, Archer MSA, or Medicare Advantage MSA Information		
Total of all individuals represented = 22,790,244		\$ 1,085	Form 5498-SA				
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2022 for 2021		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2021 General Instructions for Certain Information Returns.			
		\$ 2,302,399					
PARTICIPANT'S name		4 Rollover contributions	5 Fair market value of HSA, Archer MSA, or MA MSA				
		\$ 18,535	\$ 20,516,023				
Street address (including apt. no.)		6 HSA <input type="checkbox"/>					
City or town, state or province, country, and ZIP or foreign postal code		Archer MSA <input type="checkbox"/>					
Account number (see instructions)		MA <input type="checkbox"/>					
		MSA <input type="checkbox"/>					

Form **5498-SA**

Cat. No. 38467V

www.irs.gov/Form5498SA

Department of the Treasury - Internal Revenue Service

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2021 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		1 Employee or self-employed person's Archer MSA contributions made in 2021 and 2022 for 2021	OMB No. 1545-1518	2021	HSA, Archer MSA, or Medicare Advantage MSA Information
Total of all forms filed = 26,074,010		\$ 2,993	Form 5498-SA		
2 Total contributions made in 2021		\$ 44,287,213			
TRUSTEE'S TIN	PARTICIPANT'S TIN	3 Total HSA or Archer MSA contributions made in 2022 for 2021		Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2021 General Instructions for Certain Information Returns.	
		\$ 1,529,382			
PARTICIPANT'S name		4 Rollover contributions	5 Fair market value of HSA, Archer MSA, or MA MSA		
		\$ 165,788	\$ 94,440,060		
Street address (including apt. no.)		6 HSA <input type="checkbox"/>			
City or town, state or province, country, and ZIP or foreign postal code		Archer MSA <input type="checkbox"/>			
Account number (see instructions)		MA <input type="checkbox"/>			
		MSA <input type="checkbox"/>			

Form **5498-SA**

Cat. No. 38467V

www.irs.gov/Form5498SA

Department of the Treasury - Internal Revenue Service

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2021 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		1 IRA contributions (other than amounts in boxes 2-4, 8-10, 13a, and 14a)	OMB No. 1545-0747		2021	IRA Contribution Information
		\$ 6,199,275	Form 5498			
Total of all forms filed = 140,274,648 TRUSTEE'S or ISSUER'S TIN PARTICIPANT'S TIN		2 Rollover contributions				
		\$ 7,469,447				
TRUSTEE'S or ISSUER'S TIN PARTICIPANT'S TIN		3 Roth IRA conversion amount	4 Recharacterized contributions			Copy B
		\$ 1,602,230	\$ 138,639			
TRUSTEE'S or ISSUER'S TIN PARTICIPANT'S TIN		5 FMV of account	6 Life insurance cost included in box 1			For Participant
		\$ 133,665,052	\$ *			
PARTICIPANT'S name		7 IRA <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Roth IRA <input type="checkbox"/>				This information is being furnished to the IRS.
		8 SEP contributions	9 SIMPLE contributions			
Street address (including apt. no.)		\$ 1,334,426	\$ 3,165,797			
		10 Roth IRA contributions	11 If checked, required minimum distribution for 2022 <input type="checkbox"/>			
City or town, state or province, country, and ZIP or foreign postal code		\$ 12,770,759				
		12a RMD date	12b RMD amount			
			\$ 4,510,573			
		13a Postponed/late contrib.	13b Year	13c Code		
		\$ 13,695				
		14a Repayments	14b Code			
Account number (see instructions)		\$ 7,702				
		15a FMV of certain specified assets	15b Code(s)			
		\$ 1,874,639				

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 they are based.

2021 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 = 78,201,916		1 IRA contributions (other than amounts in boxes 2-4, 8-10, 13a, and 14a) \$ 5,688,647	OMB No. 1545-0747 2021		IRA Contribution Information
		2 Rollover contributions \$ 6,397,645	Form 5498		
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	3 Roth IRA conversion amount \$ 1,533,905	4 Recharacterized contributions \$ 133,312		Copy B
		5 FMV of account \$ 76,006,403	6 Life insurance cost included in box 1 \$ *		
PARTICIPANT'S name		7 IRA <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Roth IRA <input type="checkbox"/>	This information is being furnished to the IRS.		
		8 SEP contributions \$ 1,203,089			
Street address (including apt. no.)		10 Roth IRA contributions \$ 11,267,251	11 If checked, required minimum distribution for 2022 <input type="checkbox"/>		
		12a RMD date	12b RMD amount \$ 3,792,371		
City or town, state or province, country, and ZIP or foreign postal code		13a Postponed/late contrib. \$ 13,689	13b Year	13c Code	
		14a Repayments \$ 7,562	14b Code		
Account number (see instructions)		15a FMV of certain specified assets \$ 1,710,149	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 they are based.

2021 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		1 IRA contributions (other than amounts in boxes 2-4, 8-10, 13a, and 14a)		OMB No. 1545-0747		2021	IRA Contribution Information
		2 Rollover contributions		Form 5498			
<p align="center">Total of all forms filed = 140,274,648</p>		\$ 26,746,839		\$ 777,495,069		Copy B	
		3 Roth IRA conversion amount		4 Recharacterized contributions			
TRUSTEE'S or ISSUER'S TIN	PARTICIPANT'S TIN	\$ 43,481,298		\$ 820,535		For Participant	
PARTICIPANT'S name		5 FMV of account		6 Life insurance cost included in box 1			
Street address (including apt. no.)		7 IRA <input type="checkbox"/> SEP <input type="checkbox"/> SIMPLE <input type="checkbox"/> Roth IRA <input type="checkbox"/>		9 SIMPLE contributions		This information is being furnished to the IRS.	
		8 SEP contributions		\$ 13,649,928			
City or town, state or province, country, and ZIP or foreign postal code		10 Roth IRA contributions		11 If checked, required minimum distribution for 2022 <input type="checkbox"/>		Copy B	
		\$ 39,118,430		12a RMD date			
Account number (see instructions)		12b RMD amount		\$ 53,444,045		For Participant	
		13a Postponed/late contrib.		13b Year			
		\$ 101,514		13c Code		Copy B	
		14a Repayments		14b Code			
		\$ 151,755		15a Code(s)		For Participant	
		15a FMV of certain specified assets		\$ 180,255,888			

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 they are based.

2021 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 = 3,675,639		1 Gross distribution	OMB No. 1545-1760	Payments From Qualified Education Programs (Under Sections 529 and 530)
		\$ 3,670,769	Form 1099-Q (Rev. November 2019) For calendar year 20 ____	
PAYER'S/TRUSTEE'S TIN		2 Earnings		
RECIPIENT'S TIN		\$ 3,354,009		
PAYER'S/TRUSTEE'S TIN		3 Basis	4 Trustee-to-trustee transfer <input type="checkbox"/>	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
RECIPIENT'S name		\$ 3,420,139	5 Distribution is from:	
Street address (including apt. no.)			• Qualified tuition program— Private <input type="checkbox"/> or State <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code			• Coverdell ESA <input type="checkbox"/>	
Account number (see instructions)			6 Check if the recipient is not the designated beneficiary <input type="checkbox"/>	

Form **1099-Q** (Rev. 11-2019)

Cat. No. 32223J

www.irs.gov/Form1099Q

Department of the Treasury - Internal Revenue Service

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2021 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 = 2,607,911		1 Gross distribution \$ 2,603,347	OMB No. 1545-1760 Form 1099-Q (Rev. November 2019) For calendar year 20 ____
		2 Earnings \$ 2,372,188	
PAYER'S/TRUSTEE'S TIN	RECIPIENT'S TIN	3 Basis \$ 2,410,376	4 Trustee-to-trustee transfer <input type="checkbox"/>
RECIPIENT'S name		5 Distribution is from: • Qualified tuition program— Private <input type="checkbox"/> or State <input type="checkbox"/> • Coverdell ESA <input type="checkbox"/>	6 Check if the recipient is not the designated beneficiary <input type="checkbox"/>
Street address (including apt. no.)			
City or town, state or province, country, and ZIP or foreign postal code			
Account number (see instructions)			

Payments From Qualified Education Programs (Under Sections 529 and 530)

Copy A For Internal Revenue Service Center
File with Form 1096.
 For Privacy Act and Paperwork Reduction Act Notice, see the **current General Instructions for Certain Information Returns.**

Form **1099-Q** (Rev. 11-2019) Cat. No. 32223J www.irs.gov/Form1099Q Department of the Treasury - Internal Revenue Service

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2021 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. Total of all forms filed = 3,675,639		1 Gross distribution \$ 39,130,020	OMB No. 1545-1760 Form 1099-Q (Rev. November 2019) For calendar year 20 ____	Payments From Qualified Education Programs (Under Sections 529 and 530) Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
		2 Earnings \$ 15,235,747		
PAYER'S/TRUSTEE'S TIN RECIPIENT'S TIN	3 Basis \$ 22,087,982	4 Trustee-to-trustee transfer <input type="checkbox"/>		
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code Account number (see instructions)	5 Distribution is from: • Qualified tuition program— Private <input type="checkbox"/> or State <input type="checkbox"/> • Coverdell ESA <input type="checkbox"/>	6 Check if the recipient is not the designated beneficiary <input type="checkbox"/>		

Form **1099-Q** (Rev. 11-2019)

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

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

3232

 VOID CORRECTED

Number of Forms filed for selected line

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code Total of all forms filed = 24,014,560		1 Reportable winnings \$ 23,859,080	2 Date won
		3 Type of wager	4 Federal income tax withheld \$ 1,563,405
		5 Transaction	6 Race
		7 Winnings from identical wagers \$ 156,402	8 Cashier
PAYER'S federal identification number	PAYER'S telephone number	9 Winner's taxpayer identification no.	10 Window
WINNER'S name		11 First identification	12 Second identification
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
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 ►	

OMB No. 1545-0238

Form W-2G
Certain
Gambling
Winnings

(Rev. January 2021)

For calendar year 20 _____

 For Privacy Act and Paperwork Reduction Act Notice, see the current **General Instructions for Certain Information Returns.**

File with Form 1096

Copy A
For Internal Revenue Service Center
Form **W-2G** (Rev. 1-2021)

Cat. No. 10138V

www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

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**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line**

3232

 VOID CORRECTED

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code <p align="center">Total of all forms filed = 4,365,605</p>		1 Reportable winnings \$ 4,326,899	2 Date won
		3 Type of wager	4 Federal income tax withheld \$ 668,505
		5 Transaction	6 Race
		7 Winnings from identical wagers \$ 58,734	8 Cashier
PAYER'S federal identification number	PAYER'S telephone number	9 Winner's taxpayer identification no.	10 Window
WINNER'S name		11 First identification	12 Second identification
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
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 ►	

OMB No. 1545-0238

**Form W-2G
Certain
Gambling
Winnings**

(Rev. January 2021)
For calendar year
20 _____

For Privacy Act
and Paperwork
Reduction Act
Notice, see the
current **General
Instructions for
Certain Information
Returns.**

File with Form 1096

**Copy A
For Internal Revenue
Service Center**

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

Cat. No. 10138V

www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)

3232

VOID

CORRECTED

PAYER'S name, street address, city or town, province or state, country, and ZIP or foreign postal code Total of all forms filed = 24,014,560		1 Reportable winnings \$ 84,115,975	2 Date won
		3 Type of wager	4 Federal income tax withheld \$ 3,243,535
		5 Transaction	6 Race
		7 Winnings from identical wagers \$ 344,891	8 Cashier
PAYER'S federal identification number	PAYER'S telephone number	9 Winner's taxpayer identification no.	10 Window
WINNER'S name		11 First identification	12 Second identification
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

OMB No. 1545-0238
Form W-2G
Certain
Gambling
Winnings
 (Rev. January 2021)
 For calendar year 20 _____

For Privacy Act and Paperwork Reduction Act Notice, see the current **General Instructions for Certain Information Returns.**

File with Form 1096

Copy A
For Internal Revenue Service Center

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

Signature ►

Date ►

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

Cat. No. 10138V

www.irs.gov/FormW2G

Department of the Treasury - Internal Revenue Service

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**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of Forms filed for selected line**

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

Total of all forms filed = **5,028**

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 \$ 5,028	
10 Contract number	11 Agency code	12 Contract office number	13 Contract modification number

General Instructions

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

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

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

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



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

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

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)

2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line

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

Total of all forms filed = 2,834

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 \$ 2,834	
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.

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

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



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

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

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.

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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.

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**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)**

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

Total of all forms filed = 5,028

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 \$ 2,922,941	
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.

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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.

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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)

2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of Forms filed for selected line

Total of all forms filed = 24,747,978

651121

OMB No. 1545-0123

Final K-1 Amended K-1

Schedule K-1 (Form 1065)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

Partner's Share of Income, Deductions, Credits, etc. See back of form and separate instructions.

Part I Information About the Partnership

Form sections A, B, C, D: Partnership's employer identification number, name, address, IRS center, and PTP check.

Part II Information About the Partner

Form sections E, F, G, H1, H2, I1, I2, J, K: Partner's SSN/TIN, name, entity type, retirement plan, share of profit/loss/capital, and liabilities.

Form section L: Partner's Capital Account Analysis table with beginning and ending capital.

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

Form section N: Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss) table.

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

Table with 23 rows detailing income and deductions: 1 Ordinary business income (11,523,305), 2 Net rental real estate income (7,299,759), 3 Other net rental income (372,871), 4a-4c Guaranteed payments (837,227), 5 Interest income (6,099,862), 6a-6c Dividends (3,380,687), 7-8 Royalties and capital gains (631,886, 2,282,209), 9a-9c Capital gains (3,038,253), 10-11 Net section 1231 and other income (2,131), 12 Section 179 deduction (394,269), 13 Other deductions (5,432).

*See attached statement for additional information.

For IRS Use Only section with checkboxes for at-risk and passive activity purposes.

2021 Information Return Line Item Estimates - All figures are estimates based on samples. Number of individuals for selected line

Total of all individuals represented = 12,590,256

651121

OMB No. 1545-0123

Final K-1 Amended K-1

Schedule K-1 (Form 1065)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

Partner's Share of Income, Deductions, Credits, etc. See back of form and separate instructions.

Part I Information About the Partnership

Form sections A, B, C, D: Partnership's employer identification number, name, address, IRS center, and PTP check.

Part II Information About the Partner

Form sections E through N: Partner's SSN/TIN, name, entity type, retirement plan, share of profit/loss/capital, liabilities, capital account analysis, and net unrecognized gain/loss.

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

Table with 23 rows detailing income and deductions: 1 Ordinary business income (7,260,287), 2 Net rental real estate income (4,057,946), 3 Other net rental income (295,854), 4a-4c Guaranteed payments (745,397), 5 Interest income (3,308,936), 6a-6c Dividends (2,154,196), 7 Royalties (440,136), 8 Net short-term capital gain (1,496,513), 9a-9c Capital gains (1,713,255), 10-11 Other income (1,189), 12 Section 179 deduction (348,285), 13 Other deductions (4,297), 14-19 Various other items.

*See attached statement for additional information.

For IRS Use Only section with checkboxes for at-risk and passive activity purposes.

2021 Information Return Line Item Estimates - All figures are estimates based on samples. Amount of selected lines filed (in thousands of dollars)

651121

Total of all forms filed = 24,747,978

Final K-1 Amended K-1

OMB No. 1545-0123

Schedule K-1 (Form 1065)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

Partner's Share of Income, Deductions, Credits, etc. See back of form and separate instructions.

Part I Information About the Partnership

Form fields for Part I: 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

Form fields for Part II: E Partner's SSN or TIN, F Name, address, city, state, and ZIP code for partner, G General partner or LLC member-manager, H1 Domestic partner, H2 If the partner is a disregarded entity (DE), I1 What type of entity is this partner?, I2 If this partner is a retirement plan, J Partner's share of profit, loss, and capital, K Partner's share of liabilities

Form fields for Part L: Partner's Capital Account Analysis, including Beginning capital account, Capital contributed during the year, Current year net income (loss), Other increase (decrease), Withdrawals and distributions, Ending capital account

Form field for Part M: Did the partner contribute property with a built-in gain (loss)?

Form fields for Part N: Partner's Share of Net Unrecognized Section 704(c) Gain or (Loss), Beginning, Ending

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

Table with 4 columns: Line number, Description, Amount, and Other information. Rows include: 1 Ordinary business income (loss) 269,416,861; 2 Net rental real estate income (loss) 10,753,600; 3 Other net rental income (loss) 1,055,821; 4a-guaranteed payments for services; 4b-guaranteed payments for capital; 4c-total guaranteed payments 66,593,907; 5 Interest income 31,451,849; 6a-Ordinary dividends 49,635,737; 6b-qualified dividends; 6c-dividend equivalents 146,561; 7-Royalties 12,100,087; 8-Net short-term capital gain (loss) 30,463,272; 9a-Net long-term capital gain (loss) 399,223,290; 9b-Collectibles (28%) gain (loss); 9c-Unrecaptured section 1250 gain; 10-Net section 1231 gain (loss); 11-Other income (loss) 12,529; 12-Section 179 deduction 5,981,403; 13-Other deductions 31,173; 14-Self-employment earnings (loss); 15-Credits; 16-Schedule K-3 is attached if checked; 17-Alternative minimum tax (AMT) items; 18-Tax-exempt income and nondeductible expenses; 19-Distributions; 20-Other information; 21-Foreign taxes paid or accrued

Form fields for Part III: 22 More than one activity for at-risk purposes*, 23 More than one activity for passive activity purposes*, *See attached statement for additional information.

For IRS Use Only

2021 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 = 3,372,280

Final K-1

Amended K-1

OMB No. 1545-0092

Schedule K-1 (Form 1041)

2021

Department of the Treasury Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

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

See back of form and instructions.

Part I Information About the Estate or Trust

Form sections A through E: 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, E Check if this is the final Form 1041.

Part II Information About the Beneficiary

Form sections F through H: 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

Table with 4 columns: Line item number, Description, Amount, and Other items. Rows include Interest income (962,111), Ordinary dividends (1,283,016), Net short-term capital gain (201,840), Net long-term capital gain (551,021), 28% rate gain, Unrecaptured section 1250 gain, Other portfolio and nonbusiness income (543,327), Ordinary business income (120,172), Net rental real estate income (296,143), Other rental income (15,109), Directly apportioned deductions, Estate tax deduction, and Other information (1,866,221).

*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

**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line**

661117

Total of all individuals represented = 2,883,958

Schedule K-1 (Form 1041) 2021

Department of the Treasury Internal Revenue Service For calendar year 2021, or tax year

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

beginning 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	883,346	11	Final year deductions
2a	Ordinary dividends	1,087,582		
2b	Qualified dividends			
3	Net short-term capital gain	195,900		
4a	Net long-term capital gain	519,092		
4b	28% rate gain		12	Alternative minimum tax adjustment
4c	Unrecaptured section 1250 gain			
5	Other portfolio and nonbusiness income	511,048		
6	Ordinary business income	109,593		
7	Net rental real estate income	274,436	13	Credits and credit recapture
8	Other rental income	12,487		
9	Directly apportioned deductions			
			14	Other information
				1,599,190
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

**2021 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 = 3,372,280

Final K-1

Amended K-1

OMB No. 1545-0092

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

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 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	3,165,818	11	Final year deductions
2a	Ordinary dividends	26,994,227		
2b	Qualified dividends			
3	Net short-term capital gain	1,205,795		
4a	Net long-term capital gain	26,795,450		
4b	28% rate gain		12	Alternative minimum tax adjustment
4c	Unrecaptured section 1250 gain			
5	Other portfolio and nonbusiness income	13,132,036		
6	Ordinary business income	7,967,407		
7	Net rental real estate income	12,225,460	13	Credits and credit recapture
8	Other rental income	165,008		
9	Directly apportioned deductions			
			14	Other information
				17,947,989
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

**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of Forms filed for selected line**

671121

Total of all forms filed = **8,576,493**

Final K-1

Amended K-1

OMB No. 1545-0123

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

Department of the Treasury
Internal Revenue Service

2021

For calendar year 2021, or tax year

beginning / / 2021

ending / /

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

D Corporation's total number of shares
Beginning of tax year
End of tax year

Part II Information About the Shareholder

E Shareholder's identifying number

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

G Current year allocation percentage %

H Shareholder's number of shares
Beginning of tax year
End of tax year

I Loans from shareholder
Beginning of tax year \$
End of 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)	13	Credits
	7,793,915		319,381
2	Net rental real estate income (loss)		
	707,485		
3	Other net rental income (loss)		
	50,165		
4	Interest income		
	1,682,126		
5a	Ordinary dividends		
	306,457		
5b	Qualified dividends	14	Schedule K-3 is attached if checked <input type="checkbox"/>
6	Royalties	15	Alternative minimum tax (AMT) items
	46,042		
7	Net short-term capital gain (loss)		
	145,586		
8a	Net long-term capital gain (loss)		
	303,209		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured section 1250 gain		
9	Net section 1231 gain (loss)	16	Items affecting shareholder basis
10	Other income (loss)		
		17	Other information
11	Section 179 deduction		
	663,415		
12	Other deductions		
18	<input type="checkbox"/> More than one activity for at-risk purposes*		
19	<input type="checkbox"/> More than one activity for passive activity purposes*		

* See attached statement for additional information.

Estimates exclude duplicates and returns replaced by amendeds.

**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Number of individuals for selected line**

671121

Total of all individuals represented = **7,086,291**

Final K-1

Amended K-1

OMB No. 1545-0123

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

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

Shareholder's Share of Income, Deductions, Credits, etc.
▶ See 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
D Corporation's total number of shares Beginning of tax year _____ End of tax year _____

Part II Information About the Shareholder

E Shareholder's identifying number
F Shareholder's name, address, city, state, and ZIP code
G Current year allocation percentage _____ %
H Shareholder's number of shares Beginning of tax year _____ End of tax year _____
I Loans from shareholder Beginning of tax year _____ \$ End of 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) 6,658,181	13 Credits 263,705
2 Net rental real estate income (loss) 604,084	
3 Other net rental income (loss) 45,449	
4 Interest income 1,505,083	
5a Ordinary dividends 282,073	
5b Qualified dividends	14 Schedule K-3 is attached if checked <input type="checkbox"/>
6 Royalties 42,894	15 Alternative minimum tax (AMT) items
7 Net short-term capital gain (loss) 134,409	
8a Net long-term capital gain (loss) 282,861	
8b Collectibles (28%) gain (loss)	
8c Unrecaptured section 1250 gain	
9 Net section 1231 gain (loss)	16 Items affecting shareholder basis
10 Other income (loss)	
	17 Other information
11 Section 179 deduction 629,952	
12 Other deductions	
18 <input type="checkbox"/> More than one activity for at-risk purposes*	
19 <input type="checkbox"/> More than one activity for passive activity purposes*	

* See attached statement for additional information.

Estimates exclude duplicates and returns replaced by amendeds.

**2021 Information Return Line Item Estimates - All figures are estimates based on samples.
Amount of selected lines filed (in thousands of dollars)**

671121

Total of all forms filed = **8,576,493**

Final K-1 Amended K-1

OMB No. 1545-0123

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

2021

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year

beginning / / 2021 ending / /

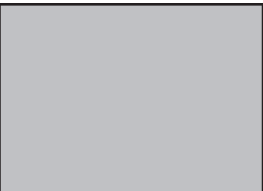
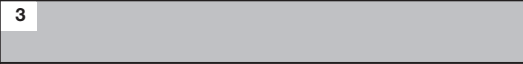
Shareholder's Share of Income, Deductions, Credits, etc. ▶ See separate instructions.

Part I Information About the Corporation		Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items	
A Corporation's employer identification number		1 Ordinary business income (loss) 686,566,571	13 Credits 3,489,292
B Corporation's name, address, city, state, and ZIP code	2 Net rental real estate income (loss) 10,568,101	3 Other net rental income (loss) 1,280,616	14 Schedule K-3 is attached if checked <input type="checkbox"/>
	4 Interest income 7,325,240	5a Ordinary dividends 8,367,380	15 Alternative minimum tax (AMT) items
	5b Qualified dividends	6 Royalties 2,904,587	7 Net short-term capital gain (loss) 2,139,659
C IRS Center where corporation filed return	8a Net long-term capital gain (loss) 147,468,005	8b Collectibles (28%) gain (loss)	8c Unrecaptured section 1250 gain
D Corporation's total number of shares Beginning of tax year _____ End of tax year _____	9 Net section 1231 gain (loss)	10 Other income (loss)	16 Items affecting shareholder basis
	E Shareholder's identifying number	11 Section 179 deduction 26,774,201	12 Other deductions
F Shareholder's name, address, city, state, and ZIP code	17 Other information	18 <input type="checkbox"/> More than one activity for at-risk purposes*	19 <input type="checkbox"/> More than one activity for passive activity purposes*
G Current year allocation percentage _____ %	* See attached statement for additional information.		
H Shareholder's number of shares Beginning of tax year _____ End of tax year _____	For IRS Use Only		
I Loans from shareholder Beginning of tax year _____ \$ End of tax year _____ \$			

2021 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.		<div style="text-align: center;">  </div>	OMB No. 1545-0116	<div style="font-size: 2em; font-weight: bold;">2021</div>	<div style="font-weight: bold;">Nonemployee Compensation</div>
<div style="font-weight: bold; color: blue;">Total of all forms filed = 38,003,140</div>			Form 1099-NEC		
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation \$ 37,654,166		<div style="font-weight: bold;">Copy 1 For State Tax Department</div>	
RECIPIENT'S name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>			
Street address (including apt. no.)		3 			
City or town, state or province, country, and ZIP or foreign postal code		4 Federal income tax withheld \$ 104,212			
Account number (see instructions)		5 State tax withheld \$ -----	6 State/Payer's state no.	7 State income \$ -----	

Form **1099-NEC**

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

2021 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.			OMB No. 1545-0116	2021	Nonemployee Compensation
Total of all individuals represented = 25,958,770			Form 1099-NEC		
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation		Copy 1 For State Tax Department	
		\$ 25,810,918			
RECIPIENT'S name		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>			
Street address (including apt. no.)		3 			
City or town, state or province, country, and ZIP or foreign postal code		4 Federal income tax withheld			
		\$ 97,209			
Account number (see instructions)		5 State tax withheld	6 State/Payer's state no.	7 State income	
		\$		\$	
		\$		\$	

Form **1099-NEC**www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

2021 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. <p style="text-align: center;">Total of all forms filed = 38,003,140</p>			OMB No. 1545-0116 <p style="font-size: 2em; font-weight: bold;">2021</p> Form 1099-NEC	Nonemployee Compensation
PAYER'S TIN	RECIPIENT'S TIN	1 Nonemployee compensation \$ 658,005,225		Copy 1 For State Tax Department
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		2 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/> 3 		
		4 Federal income tax withheld \$ 75,674		
		5 State tax withheld \$	6 State/Payer's state no.	
Account number (see instructions) \$		7 State income \$		

Form **1099-NEC**

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

7272

Number of Forms filed for selected line

VOID

 CORRECTED

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 = 354,039		1 Coverdell ESA contributions	OMB No. 1545-1815	2021 Form 5498-ESA	Coverdell ESA Contribution Information
		\$ 342,774	2 Rollover contributions		
		\$ 7,026			
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN				Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2021 General Instructions for Certain Information Returns.
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**

Cat. No. 34011J

www.irs.gov/Form5498ESA

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.7272 VOID CORRECTED
Number of individuals for selected line

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 = 298,034		1 Coverdell ESA contributions	OMB No. 1545-1815	2021	Coverdell ESA Contribution Information
		\$ 287,982	2 Rollover contributions		
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN	\$ 6,819			Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2021 General Instructions for Certain Information Returns.
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**

Cat. No. 34011J

www.irs.gov/Form5498ESA

Department of the Treasury - Internal Revenue Service

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Amount of selected lines filed (in thousands of dollars)

7272

VOID CORRECTED

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 = 354,039		1 Coverdell ESA contributions \$ 351,161	OMB No. 1545-1815 2021 Form 5498-ESA
		2 Rollover contributions \$ 62,062	
TRUSTEE'S/ISSUER'S TIN	BENEFICIARY'S TIN		
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)			

Coverdell ESA Contribution Information

Copy A
For
Internal Revenue
Service Center
File with Form 1096.

 For Privacy Act and Paperwork Reduction Act Notice, see the **2021 General Instructions for Certain Information Returns.**

Form **5498-ESA** Cat. No. 34011J www.irs.gov/Form5498ESA 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

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 = 4,875,750		1 Date of closing	OMB No. 1545-0997 2021 Form 1099-S	Proceeds From Real Estate Transactions
		2 Gross proceeds \$ 4,835,700		
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		4 Transferor received or will receive property or services as part of the consideration (if checked) ▶ <input type="checkbox"/>		
Street address (including apt. no.)		5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) ▶ <input type="checkbox"/>		
City or town, state or province, country, and ZIP or foreign postal code		6 Buyer's part of real estate tax \$ 1,592,221		
Account number (see instructions)				

Form **1099-S**

(keep for your records)

www.irs.gov/Form1099S

Department of the Treasury - Internal Revenue Service

2021 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 Total of all individuals represented = 4,451,595		1 Date of closing	OMB No. 1545-0997 2021 Form 1099-S	Proceeds From Real Estate Transactions
		2 Gross proceeds \$ 4,420,098		
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		4 Transferor received or will receive property or services as part of the consideration (if checked) . . . ▶ <input type="checkbox"/>		
Street address (including apt. no.)		5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) ▶ <input type="checkbox"/>		
City or town, state or province, country, and ZIP or foreign postal code		6 Buyer's part of real estate tax \$ 1,531,835		
Account number (see instructions)				

Form **1099-S**

(keep for your records)

www.irs.gov/Form1099S

Department of the Treasury - Internal Revenue Service

2021 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 Total of all forms filed = 4,875,750		1 Date of closing	OMB No. 1545-0997 2021 Form 1099-S	Proceeds From Real Estate Transactions
		2 Gross proceeds \$ 1,859,900,000		
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		4 Transferor received or will receive property or services as part of the consideration (if checked) ▶ <input type="checkbox"/>		
Street address (including apt. no.)		5 If checked, transferor is a foreign person (nonresident alien, foreign partnership, foreign estate, or foreign trust) ▶ <input type="checkbox"/>		
City or town, state or province, country, and ZIP or foreign postal code		6 Buyer's part of real estate tax \$ 1,375,259		
Account number (see instructions)				

Form **1099-S**

(keep for your records)

www.irs.gov/Form1099S

Department of the Treasury - Internal Revenue Service

2021 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 = 2,586,716,551			Applicable checkbox on Form 8949		OMB No. 1545-0715		2021 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions	
			1a Description of property (Example: 100 sh. XYZ Co.)						
PAYER'S TIN			RECIPIENT'S TIN			1b Date acquired		1c Date sold or disposed	
RECIPIENT'S name			1d Proceeds		1e Cost or other basis		Copy 1 For State Tax Department		
Street address (including apt. no.)			\$ 2,440,012,504		\$ 2,073,870,375				
City or town, state or province, country, and ZIP or foreign postal code			1f Accrued market discount		1g Wash sale loss disallowed				
Account number (see instructions)			\$ 600,679		\$ 387,524,241				
CUSIP number			2 Short-term gain or loss <input type="checkbox"/>		3 If checked, proceeds from:				
FATCA filing requirement <input type="checkbox"/>			Long-term gain or loss <input type="checkbox"/>		Collectibles <input type="checkbox"/>				
14 State name			Ordinary <input type="checkbox"/>		QOF <input type="checkbox"/>				
15 State identification no.			4 Federal income tax withheld		5 If checked, noncovered security <input type="checkbox"/>				
16 State tax withheld			\$ 417,980		7 If checked, loss is not allowed based on amount in 1d <input type="checkbox"/>				
-----			6 Reported to IRS:		8 Profit or (loss) realized in 2021 on closed contracts		9 Unrealized profit or (loss) on open contracts—12/31/2020		
-----			Gross proceeds <input type="checkbox"/>		\$ 3,904,053		\$ 640,607		
-----			Net proceeds <input type="checkbox"/>		10 Unrealized profit or (loss) on open contracts—12/31/2021		11 Aggregate profit or (loss) on contracts		
-----			12 If checked, basis reported to IRS <input type="checkbox"/>		\$ 190,859		\$ 3,982,863		
-----			13 Bartering		\$ 25,354				

Form **1099-B**

www.irs.gov/Form1099B

Department of the Treasury - Internal Revenue Service

2021 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 individuals represented = 54,977,235			Applicable checkbox on Form 8949		OMB No. 1545-0715		2021 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions	
			1a Description of property (Example: 100 sh. XYZ Co.)						
PAYER'S TIN			RECIPIENT'S TIN			1b Date acquired		1c Date sold or disposed	
						1d Proceeds \$ 53,930,934		1e Cost or other basis \$ 47,550,700	
RECIPIENT'S name			Street address (including apt. no.)			1f Accrued market discount \$ 248,685		1g Wash sale loss disallowed \$ 11,699,350	
						2 Short-term gain or loss <input type="checkbox"/> Long-term gain or loss <input type="checkbox"/> Ordinary <input type="checkbox"/>		3 If checked, proceeds from: Collectibles <input type="checkbox"/> QOF <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code			Account number (see instructions)			4 Federal income tax withheld \$ 129,969		5 If checked, noncovered security <input type="checkbox"/>	
						6 Reported to IRS: Gross proceeds <input type="checkbox"/> Net proceeds <input type="checkbox"/>		7 If checked, loss is not allowed based on amount in 1d <input type="checkbox"/>	
CUSIP number			FATCA filing requirement <input type="checkbox"/>			8 Profit or (loss) realized in 2021 on closed contracts \$ 554,662		9 Unrealized profit or (loss) on open contracts—12/31/2020 \$ 153,419	
						10 Unrealized profit or (loss) on open contracts—12/31/2021 \$ 111,138		11 Aggregate profit or (loss) on contracts \$ 549,766	
14 State name		15 State identification no.	16 State tax withheld \$		12 If checked, basis reported to IRS <input type="checkbox"/>		13 Bartering \$ 7,582		

**Copy 1
For State Tax
Department**

Form **1099-B**

www.irs.gov/Form1099B

Department of the Treasury - Internal Revenue Service

2021 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 = 2,586,716,551			Applicable checkbox on Form 8949	OMB No. 1545-0715 2021 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions
1a Description of property (Example: 100 sh. XYZ Co.)					
PAYER'S TIN		RECIPIENT'S TIN	1b Date acquired	1c Date sold or disposed	Copy 1 For State Tax Department
			1d Proceeds \$ 15,223,000,000	1e Cost or other basis \$ 14,200,000,000	
			1f Accrued market discount \$ 302,243	1g Wash sale loss disallowed \$ 723,722,466	
RECIPIENT'S name			2 Short-term gain or loss <input type="checkbox"/> Long-term gain or loss <input type="checkbox"/> Ordinary <input type="checkbox"/>	3 If checked, proceeds from: Collectibles <input type="checkbox"/> QOF <input type="checkbox"/>	
Street address (including apt. no.)			4 Federal income tax withheld \$ 190,768	5 If checked, noncovered security <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code			6 Reported to IRS: Gross proceeds <input type="checkbox"/> Net proceeds <input type="checkbox"/>	7 If checked, loss is not allowed based on amount in 1d <input type="checkbox"/>	
Account number (see instructions)			8 Profit or (loss) realized in 2021 on closed contracts \$ 10,759,755	9 Unrealized profit or (loss) on open contracts—12/31/2020 \$ 365,023	
CUSIP number		FATCA filing requirement <input type="checkbox"/>	10 Unrealized profit or (loss) on open contracts—12/31/2021 \$ -206,163	11 Aggregate profit or (loss) on contracts \$ -2,012,505	
14 State name	15 State identification no.	16 State tax withheld \$	12 If checked, basis reported to IRS <input type="checkbox"/>	13 Bartering \$ 83,307	
		\$			

Form **1099-B**www.irs.gov/Form1099B

Department of the Treasury - Internal Revenue Service

2021 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.		OMB No. 1545-0877		2021 Form 1099-A	Acquisition or Abandonment of Secured Property
Total of all forms filed = 128,798					
LENDER'S TIN	BORROWER'S TIN	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding	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.	
			\$ 128,798		
BORROWER'S name		3	4 Fair market value of property		
Street address (including apt. no.)			\$ 127,777		
City or town, state or province, country, and ZIP or foreign postal code		5 If checked, the borrower was personally liable for repayment of the debt ► <input type="checkbox"/>			
Account number (see instructions)		6 Description of property			

2021 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.		OMB No. 1545-0877 2021 Form 1099-A	Acquisition or Abandonment of Secured Property
Total of all individuals represented = 126,611			
LENDER'S TIN	BORROWER'S TIN	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding \$ 126,611
BORROWER'S name		3	4 Fair market value of property \$ 125,602
Street address (including apt. no.)		5 If checked, the borrower was personally liable for repayment of the debt <input type="checkbox"/>	
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

2021 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 = 128,798		OMB No. 1545-0877 2021 Form 1099-A		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.
LENDER'S TIN	BORROWER'S TIN	1 Date of lender's acquisition or knowledge of abandonment	2 Balance of principal outstanding \$ 11,326,175	
BORROWER'S name		3	4 Fair market value of property \$ 13,450,860	
Street address (including apt. no.)		5 If checked, the borrower was personally liable for repayment of the debt <input type="checkbox"/>		
City or town, state or province, country, and ZIP or foreign postal code		6 Description of property		
Account number (see instructions)				

2021 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. <p align="center">Total of all forms filed = 86,897,924</p>		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 <p align="center">2021</p> <p align="center">Form 1098</p>	<p align="center">Mortgage Interest Statement</p>
		1 Mortgage interest received from payer(s)/borrower(s)* \$ 85,956,086		<p align="center">Copy B For Payer/ Borrower</p> <p>The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.</p>	
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	2 Outstanding mortgage principal \$ 85,013,429	3 Mortgage origination date		
PAYER'S/BORROWER'S name		4 Refund of overpaid interest \$ 113,415	5 Mortgage insurance premiums \$ 16,145,980		
Street address (including apt. no.)		6 Points paid on purchase of principal residence \$ 3,123,395			
City or town, state or province, country, and ZIP or foreign postal code		7 <input type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.			
9 Number of properties securing the mortgage	10 Other	8 Address or description of property securing mortgage			
Account number (see instructions)					
		11 Mortgage acquisition date			

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

2021 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. <p align="center">Total of all individuals represented = 60,339,751</p>		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.	OMB No. 1545-1380 <p align="center">2021</p> Form 1098	<p align="center">Mortgage Interest Statement</p>
RECIPIENT'S/LENDER'S TIN		PAYER'S/BORROWER'S TIN		
PAYER'S/BORROWER'S name		1 Mortgage interest received from payer(s)/borrower(s)* \$ 59,982,006	3 Mortgage origination date	<p align="center">Copy B For Payer/ Borrower</p> <p>The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.</p>
Street address (including apt. no.)		2 Outstanding mortgage principal \$ 59,816,914	5 Mortgage insurance premiums \$ 14,020,160	
City or town, state or province, country, and ZIP or foreign postal code		4 Refund of overpaid interest \$ 109,288	6 Points paid on purchase of principal residence \$ 2,959,579	
9 Number of properties securing the mortgage		7 <input type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.		
10 Other		8 Address or description of property securing mortgage		
Account number (see instructions)		11 Mortgage acquisition date		

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

2021 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. <p align="center">Total of all forms filed = 86,897,924</p>		*Caution: The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.		OMB No. 1545-1380 <p align="center">2021</p> <p align="center">Form 1098</p>	<p align="center">Mortgage Interest Statement</p> <p align="center">Copy B For Payer/Borrower</p> <p>The information in boxes 1 through 9 and 11 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a nondeductible item.</p>
		1 Mortgage interest received from payer(s)/borrower(s)* \$ 451,299,972			
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	2 Outstanding mortgage principal \$ 18,083,000,000	3 Mortgage origination date		
		4 Refund of overpaid interest \$ 106,365	5 Mortgage insurance premiums \$ 23,389,759		
PAYER'S/BORROWER'S name		6 Points paid on purchase of principal residence \$ 7,502,492			
Street address (including apt. no.)		7 <input type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.			
City or town, state or province, country, and ZIP or foreign postal code		8 Address or description of property securing mortgage			
9 Number of properties securing the mortgage	10 Other				
Account number (see instructions)				11 Mortgage acquisition date	

Form **1098**

(Keep for your records)

www.irs.gov/Form1098

Department of the Treasury - Internal Revenue Service

2021 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		1 Payments received for qualified tuition and related expenses \$ 26,730,799	OMB No. 1545-1574 2021 Form 1098-T	Tuition Statement Copy B For Student 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.
Total of all forms filed = 27,936,857		2 0		
FILER'S employer identification no.	STUDENT'S TIN	3		
STUDENT'S name		4 Adjustments made for a prior year \$ 1,294,343	5 Scholarships or grants \$ 15,954,935	
Street address (including apt. no.)		6 Adjustments to scholarships or grants for a prior year \$ 524,410	7 Checked if the amount in box 1 includes amounts for an academic period beginning January-March 2022 <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code				
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student <input type="checkbox"/>	9 Checked if a graduate student <input type="checkbox"/>	10 Ins. contract reimb./refund \$ 2,413	

Form **1098-T**

(keep for your records)

www.irs.gov/Form1098T

Department of the Treasury - Internal Revenue Service

2021 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	2021	Tuition Statement
Total of all individuals represented = 25,509,085		\$ 24,610,655	2		
FILER'S employer identification no.	STUDENT'S TIN	3			Copy B For Student This is important tax information and is being furnished to the IRS. This form must be used to complete Form 8863 to claim education credits. Give it to the tax preparer or use it to prepare the tax return.
STUDENT'S name		4 Adjustments made for a prior year	5 Scholarships or grants		
Street address (including apt. no.)		\$ 1,293,278	\$ 15,401,564		
City or town, state or province, country, and ZIP or foreign postal code		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an academic period beginning January-March 2022 <input type="checkbox"/>		
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student <input type="checkbox"/>	\$ 524,410	9 Checked if a graduate student <input type="checkbox"/>	10 Ins. contract reimb./refund 2,413	

Form **1098-T**

(keep for your records)

www.irs.gov/Form1098T

Department of the Treasury - Internal Revenue Service

2021 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	<div style="font-size: 2em; font-weight: bold;">2021</div> <div>Form 1098-T</div>	<div style="font-size: 1.5em; font-weight: bold;">Tuition Statement</div>
Total of all forms filed = 27,936,857		\$ 277,438,083	2		
FILER'S employer identification no.	STUDENT'S TIN	3			
STUDENT'S name		4 Adjustments made for a prior year	5 Scholarships or grants	<div style="font-weight: bold;">Copy B For Student</div> <p style="font-size: 0.8em;">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.</p>	
Street address (including apt. no.)		\$ 2,126,801	\$ 132,830,617		
City or town, state or province, country, and ZIP or foreign postal code		6 Adjustments to scholarships or grants for a prior year	7 Checked if the amount in box 1 includes amounts for an academic period beginning January–March 2022 <input type="checkbox"/>		
Service Provider/Acct. No. (see instr.)	8 Checked if at least half-time student <input type="checkbox"/>	\$ 1,010,431	10 Ins. contract reimb./refund		
		9 Checked if a graduate student <input type="checkbox"/>	\$ 8,412		

Form **1098-T**

(keep for your records)

www.irs.gov/Form1098T

Department of the Treasury - Internal Revenue Service

2021 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 <p style="text-align: center;">Total of all forms filed = 11,042,811</p>			OMB No. 1545-1576 <div style="font-size: 2em; font-weight: bold; text-align: center;">2021</div> Form 1098-E	Student Loan Interest Statement
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest received by lender \$ 10,896,285		
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 <input type="checkbox"/>		

Form **1098-E**

(keep for your records)

www.irs.gov/Form1098E

Department of the Treasury - Internal Revenue Service

2021 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 = 8,999,441			OMB No. 1545-1576 2021 Form 1098-E	Student Loan Interest Statement Copy B For Borrower <small>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.</small>
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest received by lender \$ 8,893,281		
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				
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 <input type="checkbox"/>		

Form **1098-E**

(keep for your records)

www.irs.gov/Form1098E

Department of the Treasury - Internal Revenue Service

2021 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 = 11,042,811			OMB No. 1545-1576 2021 Form 1098-E	Student Loan Interest Statement
RECIPIENT'S TIN	BORROWER'S TIN	1 Student loan interest received by lender \$ 17,056,382		
BORROWER'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				
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 <input type="checkbox"/>		

Form **1098-E**

(keep for your records)

www.irs.gov/Form1098E

Department of the Treasury - Internal Revenue Service

2021 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. Total of all forms filed = 6,295,589		1 Date of identifiable event	OMB No. 1545-1424	2021 Form 1099-C	Cancellation of Debt
		2 Amount of debt discharged \$ 6,241,921			
		3 Interest, if included in box 2 \$ 535,295			
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description			Copy B For Debtor This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
DEBTOR'S name					
Street address (including apt. no.)		5 If checked, the debtor was personally liable for repayment of the debt <input type="checkbox"/>			
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 \$ 123,121		

Form **1099-C**

(keep for your records)

www.irs.gov/Form1099C

Department of the Treasury - Internal Revenue Service

2021 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. Total of all individuals represented = 5,070,290		1 Date of identifiable event	OMB No. 1545-1424	2021 Form 1099-C	Cancellation of Debt
		2 Amount of debt discharged			
		3 Interest, if included in box 2			
		\$ 5,035,894			
		\$ 507,235			
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description			Copy B For Debtor This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.
DEBTOR'S name		5 If checked, the debtor was personally liable for repayment of the debt ▶ <input type="checkbox"/>			
Street address (including apt. no.)					
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		
			\$ 119,831		

Form **1099-C**

(keep for your records)

www.irs.gov/Form1099C

Department of the Treasury - Internal Revenue Service

2021 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. Total of all forms filed = 6,295,589		1 Date of identifiable event	OMB No. 1545-1424	2021 Form 1099-C	Cancellation of Debt	
		2 Amount of debt discharged \$ 30,747,509				
		3 Interest, if included in box 2 \$ 1,377,179				
CREDITOR'S TIN	DEBTOR'S TIN	4 Debt description			Copy B For Debtor This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.	
DEBTOR'S name		5 If checked, the debtor was personally liable for repayment of the debt ▶ <input type="checkbox"/>				
Street address (including apt. no.)						
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 \$ 7,948,867			

Form **1099-C**

(keep for your records)

www.irs.gov/Form1099C

Department of the Treasury - Internal Revenue Service

2021 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 = 99,184,074		1 Unemployment compensation		OMB No. 1545-0120	2021	Certain Government Payments
		\$ 28,882,303		2 State or local income tax refunds, credits, or offsets		
PAYER'S TIN		RECIPIENT'S TIN		3 Box 2 amount is for tax year		4 Federal income tax withheld \$ 16,295,985
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 RTAA payments \$ *		6 Taxable grants \$ 586,199		Copy 1 For State Tax Department
		7 Agriculture payments \$ 778,882		8 Check if box 2 is trade or business income <input type="checkbox"/>		
		9 Market gain \$ *				
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 they are based.**

2021 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. <p align="center">Total of all forms filed = 85,695,654</p>		1 Unemployment compensation OMB No. 1545-0120 \$ 28,406,839		2021 Form 1099-G	<p align="center">Certain Government Payments</p>
		2 State or local income tax refunds, credits, or offsets \$ 64,543,961			
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 amount is for tax year		4 Federal income tax withheld \$ 16,179,876	<p align="center">Copy 1 For State Tax Department</p>
RECIPIENT'S name		5 RTAA payments \$ *		6 Taxable grants \$ 576,287	
Street address (including apt. no.)		7 Agriculture payments \$ 774,772		8 Check if box 2 is trade or business income <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code		9 Market gain \$ *			
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 they are based.**

2021 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. <p align="center">Total of all forms filed = 99,184,074</p>		1 Unemployment compensation \$ 343,033,016	OMB No. 1545-0120 <p align="center">2021</p> Form 1099-G	<p align="center">Certain Government Payments</p>	
		2 State or local income tax refunds, credits, or offsets \$ 80,433,953			
PAYER'S TIN	RECIPIENT'S TIN	3 Box 2 amount is for tax year	4 Federal income tax withheld \$ 15,893,769		<p align="center">Copy 1 For State Tax Department</p>
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 RTAA payments \$ *	6 Taxable grants \$ 5,931,473		
		7 Agriculture payments \$ 9,304,398	8 Check if box 2 is trade or business income <input type="checkbox"/>		
		9 Market gain \$ *			
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 they are based.

2021 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. <p align="center">Total of all forms filed = 98,922,022</p>		1a Total ordinary dividends \$ 89,427,345		OMB No. 1545-0110 <div style="font-size: 2em; font-weight: bold; text-align: center;">2021</div> Form 1099-DIV	Dividends and Distributions Copy 1 For State Tax Department
		1b Qualified dividends \$ 83,582,226			
		2a Total capital gain distr. \$ 36,699,360			
PAYER'S TIN	RECIPIENT'S TIN	2c Section 1202 gain \$ *	2d Collectibles (28%) gain \$ 1,061		
RECIPIENT'S name		2e Section 897 ordinary dividends \$ 103,080	2f Section 897 capital gain \$ 787,760		
Street address (including apt. no.)		3 Nondividend distributions \$ 12,443,718	4 Federal income tax withheld \$ 1,627,113		
City or town, state or province, country, and ZIP or foreign postal code		5 Section 199A dividends \$ 24,282,060	6 Investment expenses \$ 205,540		
		7 Foreign tax paid \$ 21,264,880	8 Foreign country or U.S. possession		
		9 Cash liquidation distributions \$ 280,536	10 Noncash liquidation distributions \$ 5,230		
		11 Exempt-interest dividends \$ 8,866,176	12 Specified private activity bond interest dividends \$ 6,019,186		
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

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

**2021 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. <p align="center">Total of all forms filed = 98,922,022</p>		1a Total ordinary dividends \$ 89,427,345		OMB No. 1545-0110 <div style="font-size: 2em; font-weight: bold;">2021</div> Form 1099-DIV	Dividends and Distributions Copy 1 For State Tax Department
		1b Qualified dividends \$ 83,582,226			
		2a Total capital gain distr. \$ 36,699,360			
PAYER'S TIN	RECIPIENT'S TIN	2c Section 1202 gain \$ *	2d Collectibles (28%) gain \$ 1,061		
RECIPIENT'S name		2e Section 897 ordinary dividends \$ 103,080	2f Section 897 capital gain \$ 787,760		
		3 Nondividend distributions \$ 12,443,718		4 Federal income tax withheld \$ 1,627,113	
Street address (including apt. no.)		5 Section 199A dividends \$ 24,282,060	6 Investment expenses \$ 205,540		
		7 Foreign tax paid \$ 21,264,880		8 Foreign country or U.S. possession	
City or town, state or province, country, and ZIP or foreign postal code		9 Cash liquidation distributions \$ 280,536	10 Noncash liquidation distributions \$ 5,230		
		11 Exempt-interest dividends \$ 8,866,176		12 Specified private activity bond interest dividends \$ 6,019,186	
Account number (see instructions)		13 State	14 State identification no. ----- ----- -----	15 State tax withheld \$ ----- ----- -----	
		FATCA filing requirement <input type="checkbox"/>			

Form **1099-DIV**

www.irs.gov/Form1099DIV

Department of the Treasury - Internal Revenue Service

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

2021 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 = 98,922,022		1a Total ordinary dividends		OMB No. 1545-0110			
		\$ 388,251,396		2021			
		1b Qualified dividends					
		\$ 311,470,066		Form 1099-DIV			
		2a Total capital gain distr.		2b Unrecap. Sec. 1250 gain			
PAYER'S TIN		RECIPIENT'S TIN		\$ 169,206,117		\$ 485,846	
				2c Section 1202 gain		2d Collectibles (28%) gain	
RECIPIENT'S name		Street address (including apt. no.)		\$ *		\$ 143	
				2e Section 897 ordinary dividends		2f Section 897 capital gain	
City or town, state or province, country, and ZIP or foreign postal code		FATCA filing requirement <input type="checkbox"/>		\$ 15,780		\$ 201,889	
				3 Nondividend distributions		4 Federal income tax withheld	
Account number (see instructions)				\$ 13,862,962		\$ 507,335	
				5 Section 199A dividends		6 Investment expenses	
				\$ 6,920,185		\$ 18,722	
				7 Foreign tax paid		8 Foreign country or U.S. possession	
				\$ 3,036,639			
				9 Cash liquidation distributions		10 Noncash liquidation distributions	
				\$ 6,423,099		\$ 1,270,998	
				11 Exempt-interest dividends		12 Specified private activity bond interest dividends	
				\$ 19,918,909		\$ 1,630,445	
				13 State		14 State identification no.	
						15 State tax withheld	
						\$	
						\$	
						\$	

Dividends and Distributions**Copy 1
For State Tax
Department**Form **1099-DIV**

www.irs.gov/Form1099DIV

Department of the Treasury - Internal Revenue Service

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

Estimates exclude duplicates and returns replaced by amendeds.

2021 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.		Payer's RTN (optional)	OMB No. 1545-0112		Interest Income
Total of all forms filed = 154,461,743		1 Interest income	2021 Form 1099-INT		
		\$ 131,693,017			
PAYER'S TIN		2 Early withdrawal penalty	\$ 829,827		Copy 1 For State Tax Department
RECIPIENT'S TIN		3 Interest on U.S. Savings Bonds and Treas. obligations	\$ 3,126,103		
RECIPIENT'S name		4 Federal income tax withheld	5 Investment expenses		
Street address (including apt. no.)		\$ 1,279,783	\$ 82,193		
City or town, state or province, country, and ZIP or foreign postal code		6 Foreign tax paid	7 Foreign country or U.S. possession		
		\$ 31,789			
		8 Tax-exempt interest	9 Specified private activity bond interest		
		\$ 4,399,277	\$ 178,242		
		10 Market discount	11 Bond premium		
		\$ 15,209	\$ 835,960		
		12 Bond premium on Treasury obligations	13 Bond premium on tax-exempt bond		
		\$ 175,863	\$ 1,378,796		
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**www.irs.gov/Form1099INT

Department of the Treasury - Internal Revenue Service

2021 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 individuals represented = 85,794,344		Payer's RTN (optional)		OMB No. 1545-0112		2021 Form 1099-INT	Interest Income
		1 Interest income \$ 80,547,364		2 Early withdrawal penalty \$ 687,894			
PAYER'S TIN	RECIPIENT'S TIN	3 Interest on U.S. Savings Bonds and Treas. obligations \$ 2,216,697				Copy 1	
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 \$ 1,167,963		5 Investment expenses \$ 78,460		For State Tax Department	
		6 Foreign tax paid \$ 29,513		7 Foreign country or U.S. possession			
FATCA filing requirement <input type="checkbox"/>		8 Tax-exempt interest \$ 1,556,552		9 Specified private activity bond interest \$ 155,437			
		10 Market discount \$ 14,103		11 Bond premium \$ 773,989			
Account number (see instructions)		12 Bond premium on Treasury obligations \$ 163,829		13 Bond premium on tax-exempt bond \$ 1,181,578			
		14 Tax-exempt and tax credit bond CUSIP no.		15 State	16 State identification no.	17 State tax withheld \$ \$	

Form **1099-INT**

www.irs.gov/Form1099INT

Department of the Treasury - Internal Revenue Service

2021 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 = 154,461,743		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income		2021	Form 1099-INT
		\$	44,531,804		
PAYER'S TIN RECIPIENT'S TIN		2 Early withdrawal penalty		144,372	
		\$			
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		3 Interest on U.S. Savings Bonds and Treas. obligations		6,962,836	
		\$			
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		5 Investment expenses	
		\$	55,738	\$	15,939
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		6 Foreign tax paid		7 Foreign country or U.S. possession	
		\$	6,137		
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		8 Tax-exempt interest		9 Specified private activity bond interest	
		\$	43,030,292	\$	506,145
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		10 Market discount		11 Bond premium	
		\$	9,310	\$	1,029,411
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		12 Bond premium on Treasury obligations		13 Bond premium on tax-exempt bond	
		\$	283,093	\$	16,939,142
Account number (see instructions)		14 Tax-exempt and tax credit bond CUSIP no.		15 State	
				16 State identification no.	
				17 State tax withheld	
				\$	
				\$	

**Interest
Income**

Copy 1

**For State Tax
Department**

Form **1099-INT**

www.irs.gov/Form1099INT

Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

9393 VOID CORRECTED
Number of Forms filed for selected line

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 = 302,514		\$ 297,860	Form 1099-LTC (Rev. October 2019)	
		PAYER'S TIN		POLICYHOLDER'S TIN
POLICYHOLDER'S name		2 Accelerated death benefits paid	For calendar year 20__	
Street address (including apt. no.)		\$ 4,654	INSURED'S TIN	
City or town, state or province, country, and ZIP or foreign postal code		3 Check one: <input type="checkbox"/> Per diem <input type="checkbox"/> Reimbursed amount	INSURED'S name	
Account number (see instructions)		INSURED'S name	INSURED'S name	
4 Qualified contract <input type="checkbox"/> (optional)		Street address (including apt. no.)	Street address (including apt. no.)	
5 Check, if applicable <input type="checkbox"/> Chronically ill <input type="checkbox"/> Terminally ill		City or town, state or province, country, and ZIP or foreign postal code	City or town, state or province, country, and ZIP or foreign postal code	
Date certified		City or town, state or province, country, and ZIP or foreign postal code	City or town, state or province, country, and ZIP or foreign postal code	

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

Cat. No. 23021Z

www.irs.gov/Form1099LTC

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

9393 VOID CORRECTED
Number of individuals for selected line

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 individuals represented = 290,630		\$ 287,989	Form 1099-LTC (Rev. October 2019)	
PAYER'S TIN		2 Accelerated death benefits paid	For calendar year 20 ____	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
POLICYHOLDER'S TIN		\$ 4,646	INSURED'S TIN	
POLICYHOLDER'S name		3 Check one: <input type="checkbox"/> Per diem <input type="checkbox"/> Reimbursed amount	INSURED'S name	
Street address (including apt. no.)		Street address (including apt. no.)		
City or town, state or province, country, and ZIP or foreign postal code		City or town, state or province, country, and ZIP or foreign postal code		
Account number (see instructions)	4 Qualified contract <input type="checkbox"/> (optional)	5 Check, if applicable (optional):	<input type="checkbox"/> Chronically ill <input type="checkbox"/> Terminally ill Date certified	

Form **1099-LTC** (Rev. 10-2019) Cat. No. 23021Z www.irs.gov/Form1099LTC Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)

9393

 VOID CORRECTED

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 = 302,514		\$ 11,043,138	Form 1099-LTC (Rev. October 2019)	
		2 Accelerated death benefits paid	For calendar year 20 _____	
PAYER'S TIN	POLICYHOLDER'S TIN	\$ 384,431	INSURED'S TIN	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
POLICYHOLDER'S name		3 Check one: <input type="checkbox"/> Per diem <input type="checkbox"/> Reimbursed amount		
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.)		
Account number (see instructions)		City or town, state or province, country, and ZIP or foreign postal code		
4 Qualified contract (optional) <input type="checkbox"/>	5 Check, if applicable (optional): <input type="checkbox"/> Chronically ill <input type="checkbox"/> Terminally ill	Date certified		

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

Cat. No. 23021Z

www.irs.gov/Form1099LTC

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

9494

VOID CORRECTED

Number of Forms filed for selected line

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		OMB No. 1545-1517		Distributions From an HSA, Archer MSA, or Medicare Advantage MSA
Total of all forms filed = 16,095,482		Form 1099-SA (Rev. November 2019)		
		For calendar year 20		
PAYER'S TIN	RECIPIENT'S TIN	1 Gross distribution \$ 16,045,843	2 Earnings on excess cont. \$ 12,288	Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
RECIPIENT'S name		3 Distribution code	4 FMV on date of death \$ 14,131	
Street address (including apt. no.)		5 HSA <input type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>		
City or town, state or province, country, and ZIP or foreign postal code				
Account number (see instructions)				

Form **1099-SA** (Rev. 11-2019)

Cat. No. 38471D

www.irs.gov/Form1099SA

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

9494 VOID CORRECTED **Number of individuals for selected line**

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		OMB No. 1545-1517	
<p>Total of all individuals represented = 14,939,422</p>		Form 1099-SA	
		(Rev. November 2019)	
		For calendar year	
		20	
PAYER'S TIN	RECIPIENT'S TIN	1 Gross distribution	2 Earnings on excess cont.
		\$ 14,901,895	\$ 12,150
RECIPIENT'S name		3 Distribution code	4 FMV on date of death
			\$ 13,832
Street address (including apt. no.)		5 HSA <input type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code			
Account number (see instructions)			

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

Copy A For Internal Revenue Service Center File with Form 1096.
 For Privacy Act and Paperwork Reduction Act Notice, see the **current General Instructions for Certain Information Returns.**

Form **1099-SA** (Rev. 11-2019)

Cat. No. 38471D

www.irs.gov/Form1099SA

Department of the Treasury - Internal Revenue Service

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2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)
 9494 VOID CORRECTED

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number		OMB No. 1545-1517	
Total of all forms filed = 16,095,482		Form 1099-SA	
		(Rev. November 2019)	
		For calendar year 20	
PAYER'S TIN	RECIPIENT'S TIN	1 Gross distribution \$ 32,697,477	2 Earnings on excess cont. \$ 1,475
RECIPIENT'S name		3 Distribution code	4 FMV on date of death \$ 79,924
Street address (including apt. no.)		5 HSA <input type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>	
City or town, state or province, country, and ZIP or foreign postal code			
Account number (see instructions)			

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

Copy A For Internal Revenue Service Center File with Form 1096.
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2021 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 = 22,077,197		1 Rents	OMB No. 1545-0115	Miscellaneous Information 2021 Form 1099-MISC
		\$ 4,852,792	2 Royalties	
		\$ 5,384,643	3 Other income	
PAYER'S TIN	RECIPIENT'S TIN	\$ 9,712,846	\$ 297,953	Copy 1 For State Tax Department
		5 Fishing boat proceeds	6 Medical and health care payments	
		\$ 47,608	\$ 1,077,651	
RECIPIENT'S name		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest	
Street address (including apt. no.)		\$ 156,441	\$ 436,372	
City or town, state or province, country, and ZIP or foreign postal code		9 Crop insurance proceeds	10 Gross proceeds paid to an attorney	
		\$ 156,441	\$ 90,442	
Account number (see instructions)	FATCA filing requirement <input type="checkbox"/>	11 Fish purchased for resale	12 Section 409A deferrals	
		\$	\$ 565	
		13 Excess golden parachute payments	14 Nonqualified deferred compensation	
		\$ *	\$ 26,626	
		15 State tax withheld	16 State/Payer's state no.	17 State income
		\$		\$
		\$		\$

Form **1099-MISC**

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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

2021 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 individuals represented = 16,790,969		1 Rents		OMB No. 1545-0115	Miscellaneous Information
		\$ 3,863,709		2021	
		2 Royalties			
PAYER'S TIN		3 Other income		4 Federal income tax withheld	Copy 1 For State Tax Department
		\$ 8,902,444		\$ 289,541	
RECIPIENT'S TIN		5 Fishing boat proceeds		6 Medical and health care payments	
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		\$ 34,755		\$ 338,550	
		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>		8 Substitute payments in lieu of dividends or interest	
		\$ 149,881		\$ 413,613	
Account number (see instructions)		9 Crop insurance proceeds		10 Gross proceeds paid to an attorney	
FATCA filing requirement <input type="checkbox"/>		\$ 67,193		\$ 544	
11 Fish purchased for resale		12 Section 409A deferrals		\$ 26,598	
13 Excess golden parachute payments		14 Nonqualified deferred compensation		\$	
15 State tax withheld		16 State/Payer's state no.		17 State income	
\$		\$		\$	
\$		\$		\$	

Form **1099-MISC**www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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

2021 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. <p align="center">Total of all forms filed = 22,077,197</p>		1 Rents	OMB No. 1545-0115	<p align="center">2021</p> Form 1099-MISC	Miscellaneous Information
		\$ 119,040,074	2 Royalties		
		\$ 32,015,886	3 Other income		
PAYER'S TIN	RECIPIENT'S TIN	\$ 49,670,212	\$ 1,467,110	Copy 1 For State Tax Department	
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 Fishing boat proceeds	6 Medical and health care payments		
Account number (see instructions)	FATCA filing requirement <input type="checkbox"/>	\$ 840,232	\$ 15,206,095		
		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest		
		\$ 5,418,000	\$ 288,484		
		9 Crop insurance proceeds	10 Gross proceeds paid to an attorney		
		\$ 5,418,000	\$ 7,412,699		
		11 Fish purchased for resale	12 Section 409A deferrals		
		\$	\$ 16,355		
		13 Excess golden parachute payments	14 Nonqualified deferred compensation		
		\$ *	\$ 153,293		
		15 State tax withheld	16 State/Payer's state no.	17 State income	
		\$		\$	
		\$		\$	

Form 1099-MISC

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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

2021 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. <p align="center">Total of all forms filed = 1,320,734</p>		1 Patronage dividends \$ 1,113,198	OMB No. 1545-0118 2021 Form 1099-PATR	<p align="center">Taxable Distributions Received From Cooperatives</p>
		2 Nonpatronage distributions \$ 781		
		3 Per-unit retain allocations \$ 264,355		
4 Federal income tax withheld \$ 8,555	5 Redeemed nonqualified notices \$ 102,528	<p align="center">Copy B For Recipient</p> <p>This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.</p>		
PAYER'S TIN	RECIPIENT'S TIN		6 Section 199A(g) deduction \$ 218,714	7 Qualified payments (Section 199A(b)(7)) \$ 534,842
RECIPIENT'S name			8 Section 199A(a) qual. items \$ 680,114	9 Section 199A(a) SSTB items \$ 661
Street address (including apt. no.)			10 Investment credit \$ 9,851	11 Work opportunity credit \$ 293
City or town, state or province, country, and ZIP or foreign postal code		12 Other credits and deductions \$	13 Specified Coop * <input type="checkbox"/>	
Account number (see instructions)				

Form 1099-PATR

(keep for your records)

www.irs.gov/Form1099PATR

Department of the Treasury - Internal Revenue Service

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2021 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 = 1,029,133		1 Patronage dividends	OMB No. 1545-0118	2021 Form 1099-PATR	Taxable Distributions Received From Cooperatives
		\$ 925,843	2 Nonpatronage distributions		
		\$ 781	3 Per-unit retain allocations		
		\$ 221,315			
PAYER'S TIN	RECIPIENT'S TIN	4 Federal income tax withheld	5 Redeemed nonqualified notices	Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.	
		\$ 8,331	\$ 100,155		
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		6 Section 199A(g) deduction	7 Qualified payments (Section 199A(b)(7))		
		\$ 187,980	\$ 421,696		
		8 Section 199A(a) qual. items	9 Section 199A(a) SSTB items		
		\$ 542,369	\$ 661		
		10 Investment credit	11 Work opportunity credit		
		\$ 9,218	\$ 283		
Account number (see instructions)		12 Other credits and deductions	13 Specified Coop		
		\$ *	<input type="checkbox"/>		

Form **1099-PATR**

(keep for your records)

www.irs.gov/Form1099PATR

Department of the Treasury - Internal Revenue Service

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

2021 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 = 1,320,734		1 Patronage dividends	OMB No. 1545-0118	2021 Form 1099-PATR	Taxable Distributions Received From Cooperatives
		\$ 1,989,618	2 Nonpatronage distributions		
		\$ 871	3 Per-unit retain allocations		
		\$ 34,295,301	4 Federal income tax withheld		
PAYER'S TIN	RECIPIENT'S TIN	\$ 1,835	5 Redeemed nonqualified notices	\$ 99,877	Copy B For Recipient This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		6 Section 199A(g) deduction	7 Qualified payments (Section 199A(b)(7))		
		\$ 654,264	\$ 31,234,588		
		8 Section 199A(a) qual. items	9 Section 199A(a) SSTB items		
Account number (see instructions)		\$ 28,806,951	\$ 510		
		10 Investment credit	11 Work opportunity credit		
		\$ 183,940	\$ 15,719		
		12 Other credits and deductions	13 Specified Coop		
		\$ *	<input type="checkbox"/>		

Form **1099-PATR**

(keep for your records)

www.irs.gov/Form1099PATR

Department of the Treasury - Internal Revenue Service

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2021 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. <p align="center">Total of all forms filed = 109,645,201</p>		1 Gross distribution \$ 109,183,523		OMB No. 1545-0119 2021 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.					
		2a Taxable amount \$ 90,414,795									
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>			Copy 1 For State, City, or Local Tax Department				
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) \$ 26,056		4 Federal income tax withheld \$ 56,015,049							
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$ 30,121							
		7 Distribution code(s)	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other \$ 767,371 %							
		9a Your percentage of total distribution %		9b Total employee contributions \$ 2,865,887							
10 Amount allocable to IRR within 5 years \$ 4,416		11 1st year of desig. Roth contrib.		12 FATCA filing requirement <input type="checkbox"/>		14 State tax withheld \$		15 State/Payer's state no.		16 State distribution \$	
Account number (see instructions)		13 Date of payment		17 Local tax withheld \$		18 Name of locality		19 Local distribution \$			

Form **1099-R**

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

2021 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 individuals represented = 64,149,183		1 Gross distribution \$ 63,955,421		OMB No. 1545-0119 2021 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.	
		2a Taxable amount \$ 55,614,624					
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>			Copy 1 For State, City, or Local Tax Department
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) \$ 23,180		4 Federal income tax withheld \$ 38,106,577			
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 Employee contributions/ Designated Roth contributions or insurance premiums \$		6 Net unrealized appreciation in employer's securities \$ 30,036			
		7 Distribution code(s)	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other \$ 732,136 %			
		9a Your percentage of total distribution %		9b Total employee contributions \$ 2,840,197			
10 Amount allocable to IRR within 5 years \$ 4,367		11 1st year of desig. Roth contrib.	12 FATCA filing requirement <input type="checkbox"/>	14 State tax withheld \$		15 State/Payer's state no.	16 State distribution \$
Account number (see instructions)		13 Date of payment	17 Local tax withheld \$		18 Name of locality		19 Local distribution \$

Form **1099-R**

www.irs.gov/Form1099R

Department of the Treasury - Internal Revenue Service

2021 Information Return Line Item Estimates - All figures are estimates based on samples.

Amount of selected lines filed (in thousands of dollars)

VOID CORRECTED

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.

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 = 109,645,201		1 Gross distribution OMB No. 1545-0119 \$ 2,484,400,000		2021 Form 1099-R	Copy 1 For State, City, or Local Tax Department	
		2a Taxable amount \$ 1,392,600,000				
		2b Taxable amount not determined <input type="checkbox"/>		Total distribution <input type="checkbox"/>		
PAYER'S TIN	RECIPIENT'S TIN	3 Capital gain (included in box 2a) \$ 163,453	4 Federal income tax withheld \$ 157,828,806			
RECIPIENT'S name Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		5 Employee contributions/ Designated Roth contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$ 2,740,410			
		7 Distribution code(s)	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other \$ 2,367,150 %		
		9a Your percentage of total distribution %	9b Total employee contributions \$ 107,699,393			
10 Amount allocable to IRR within 5 years \$ 49,291	11 1st year of desig. Roth contrib.	12 FATCA filing requirement <input type="checkbox"/>	14 State tax withheld \$	15 State/Payer's state no.	16 State distribution \$	
Account number (see instructions)		13 Date of payment	17 Local tax withheld \$	18 Name of locality	19 Local distribution \$	

Form **1099-R**

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Department of the Treasury - Internal Revenue Service