

## Source Documents

Client Name : Johnson, John  
Client ID : TEST05  
Date Created : August 17, 2010  
Pages Processed : 21

# 2007 W-2 and EARNINGS SUMMARY

**Employee Reference Copy**  
**W-2 Wage and Tax Statement 2007**  
 Copy C for employee's records. OMB No. 1545-0048

d Control number	Dept.	Corp.	Employer use only
0000014786 V36	14349	IIUS	A 42152

c Employer's name, address, and ZIP code  
**INTEL CORPORATION**  
**2200 MISSION COLLEGE BLVD**  
**SANTA CLARA, CA 95052**

e/f Employee's name, address, and ZIP code  
**JOHN JOHNSON**  
**123 FIRST ST**  
**ANYTOWN, TX 75123**

b Employer's FED ID number	a Employee's SSA number
74-7654321	123-45-1234

1 Wages, tips, other comp.	2 Federal income tax withheld
216869.50	32330.07
3 Social security wages	4 Social security tax withheld
97500.00	6045.00
5 Medicare wages and tips	6 Medicare tax withheld
216869.50	3144.61
7 Social security tips	8 Allocated tips
9 Advance EIC payment	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	C   451.44
14 Other	12b V   39485.31
500.33 CA VDI	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
	X
15 State Employer's state ID no.	16 State wages, tips, etc.
CA 196-0988 2	216869.50
17 State income tax	18 Local wages, tips, etc.
14407.73	
19 Local income tax	20 Locality name

The wages, tips, and other compensation reflected in box 1 are the sum of those wages shown on your last pay statement, plus any additional compensation or adjustments received after the payroll close.

Your gross pay may not match your box 1 totals due to adjustments made for GTL, 401(k), cafeteria plans, etc...

To change your employee W-4 profile information, file a new W-4 with your payroll department.

JOHN JOHNSON  
 123 FIRST ST  
 ANYTOWN, TX 75123

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Fold and Detach Here →

1 Wages, tips, other comp.	2 Federal income tax withheld		
216869.50	32330.07		
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**2200 MISSION COLLEGE BLVD**  
**SANTA CLARA, CA 95052**

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74-7654321	123-45-1234

7 Social security tips	8 Allocated tips
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11 Nonqualified plans	12a See instructions for box 12
	C   451.44
14 Other	12b V   39485.31
500.33 CA VDI	12c
	12d
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	X

e/f Employee's name, address and ZIP code  
**JOHN JOHNSON**  
**123 FIRST ST**  
**ANYTOWN, TX 75123**

15 State Employer's state ID no.	16 State wages, tips, etc.
CA 196-0988 2	216869.50
17 State income tax	18 Local wages, tips, etc.
14407.73	
19 Local income tax	20 Locality name

**Federal Filing Copy**  
**W-2 Wage and Tax Statement 2007**  
 Copy B to be filed with employee's Federal Income Tax Return. OMB No. 1545-0048

1 Wages, tips, other comp.	2 Federal income tax withheld		
216869.50	32330.07		
3 Social security wages	4 Social security tax withheld		
97500.00	6045.00		
5 Medicare wages and tips	6 Medicare tax withheld		
216869.50	3144.61		
d Control number	Dept.	Corp.	Employer use only
0000014786 V36	14349	IIUS	A 42152

c Employer's name, address, and ZIP code  
**INTEL CORPORATION**  
**2200 MISSION COLLEGE BLVD**  
**SANTA CLARA, CA 95052**

b Employer's FED ID number	a Employee's SSA number
74-7654321	123-45-1234

7 Social security tips	8 Allocated tips
9 Advance EIC payment	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	C   451.44
14 Other	12b V   39485.31
500.33 CA VDI	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
	X

e/f Employee's name, address and ZIP code  
**JOHN JOHNSON**  
**123 FIRST ST**  
**ANYTOWN, TX 75123**

15 State Employer's state ID no.	16 State wages, tips, etc.
CA 196-0988 2	216869.50
17 State income tax	18 Local wages, tips, etc.
14407.73	
19 Local income tax	20 Locality name

**CA State Filing Copy**  
**W-2 Wage and Tax Statement 2007**  
 Copy 2 to be filed with employee's State Income Tax Return. OMB No. 1545-0048

1 Wages, tips, other comp.	2 Federal income tax withheld		
216869.50	32330.07		
3 Social security wages	4 Social security tax withheld		
97500.00	6045.00		
5 Medicare wages and tips	6 Medicare tax withheld		
216869.50	3144.61		
d Control number	Dept.	Corp.	Employer use only
0000014786 V36	14349	IIUS	A 42152

c Employer's name, address, and ZIP code  
**INTEL CORPORATION**  
**2200 MISSION COLLEGE BLVD**  
**SANTA CLARA, CA 95052**

b Employer's FED ID number	a Employee's SSA number
74-7654321	123-45-1234

7 Social security tips	8 Allocated tips
9 Advance EIC payment	10 Dependent care benefits
11 Nonqualified plans	12a See instructions for box 12
	C   451.44
14 Other	12b V   39485.31
500.33 CA VDI	12c
	12d
	13 Stat emp. Ret. plan 3rd party sick pay
	X

e/f Employee's name, address and ZIP code  
**JOHN JOHNSON**  
**123 FIRST ST**  
**ANYTOWN, TX 75123**

15 State Employer's state ID no.	16 State wages, tips, etc.
CA 196-0988 2	216869.50
17 State income tax	18 Local wages, tips, etc.
14407.73	
19 Local income tax	20 Locality name

**City or Local Filing Copy**  
**W-2 Wage and Tax Statement 2007**  
 Copy 2 to be filed with employee's City or Local Income Tax Return. OMB No. 1545-0048

Form **W-2** Wage and Tax Statement **2007**

Copy B to be filed with employee's FEDERAL tax return

a Control number		OMB No. 1545-0008	Void <input type="checkbox"/>
b Employer identification number <b>74-7654321</b>			
c Employer's name, address, and ZIP code PL: 0033 PC: 02 <b>ROCKLIN UNIFIED SCHOOL DIST. 2615 SIERRA MEADOWS DRIVE ROCKLIN TX 95677</b>			
d Employee's social security number <b>123-45-4567</b>			
e Employee's name (First, middle initial, last) <b>JOAN JOHNSON 123 FIRST ST ANYTOWN TX 75123</b>			
f Employee's address and ZIP code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax <b>0.00</b>
		18 Local wages, tips, etc.	19 Local income tax
		20 Locality name	
1 Wages, tips, other compensation <b>8,520.94</b>		2 Federal income tax withheld <b>0.00</b>	
3 Social security wages <b>8,520.94</b>		4 Social security tax withheld <b>528.30</b>	
5 Medicare wages and tips <b>8,520.94</b>		6 Medicare tax withheld <b>123.57</b>	
7 Social security tips		8 Allocated tips	
9 Advance EIC payment		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 <input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party payor		12b	
14 Other		12c	
		12d	

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This information is being furnished to the Internal Revenue Service

Department of the Treasury-Internal Revenue Service

Form **W-2** Wage and Tax Statement **2007**

Copy 1 to be filed with employee's State, City or Local income tax return  
Employee's and employer's copy compared

a Control number		OMB No. 1545-0008	Void <input type="checkbox"/>
b Employer identification number <b>74-7654321</b>			
c Employer's name, address, and ZIP code PL: 0033 PC: 02 <b>ROCKLIN UNIFIED SCHOOL DIST. 2615 SIERRA MEADOWS DRIVE ROCKLIN TX 95677</b>			
d Employee's social security number <b>123-45-4567</b>			
e Employee's name (First, middle initial, last) <b>JOAN JOHNSON 123 FIRST ST ANYTOWN TX 75123</b>			
f Employee's address and ZIP code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax <b>0.00</b>
		18 Local wages, tips, etc.	19 Local income tax
		20 Locality name	
1 Wages, tips, other compensation <b>8,520.94</b>		2 Federal income tax withheld <b>0.00</b>	
3 Social security wages <b>8,520.94</b>		4 Social security tax withheld <b>528.30</b>	
5 Medicare wages and tips <b>8,520.94</b>		6 Medicare tax withheld <b>123.57</b>	
7 Social security tips		8 Allocated tips	
9 Advance EIC payment		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 <input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party payor		12b	
14 Other		12c	
		12d	

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Department of the Treasury-Internal Revenue Service

Form **W-2** Wage and Tax Statement **2007**

Copy C for EMPLOYEE'S RECORDS (See enclosure & notice on back)  
If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if the income is taxable and you fail to report it.

a Control number		OMB No. 1545-0008	Void <input type="checkbox"/>
b Employer identification number <b>74-7654321</b>			
c Employer's name, address, and ZIP code PL: 0033 PC: 02 <b>ROCKLIN UNIFIED SCHOOL DIST. 2615 SIERRA MEADOWS DRIVE ROCKLIN TX 95677</b>			
d Employee's social security number <b>123-45-4567</b>			
e Employee's name (First, middle initial, last) <b>JOAN JOHNSON 123 FIRST ST ANYTOWN TX 75123</b>			
f Employee's address and ZIP code			
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax <b>0.00</b>
		18 Local wages, tips, etc.	19 Local income tax
		20 Locality name	
1 Wages, tips, other compensation <b>8,520.94</b>		2 Federal income tax withheld <b>0.00</b>	
3 Social security wages <b>8,520.94</b>		4 Social security tax withheld <b>528.30</b>	
5 Medicare wages and tips <b>8,520.94</b>		6 Medicare tax withheld <b>123.57</b>	
7 Social security tips		8 Allocated tips	
9 Advance EIC payment		10 Dependent care benefits	
11 Nonqualified plans		12a See instructions for box 12	
13 <input type="checkbox"/> Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party payor		12b	
14 Other		12c	
		12d	

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This information is being furnished to the Internal Revenue Service

Department of the Treasury-Internal Revenue Service

TAX YEAR 2007

**WELLS FARGO BANK, N.A.**

1-800-TO-WELLS (800-869-3557)  
 P.O. BOX 3908 114  
 PORTLAND, OR 97208

E.I.N. **74-7654321**

FOR TAX YEAR  
 2007

D

TAXPAYER ID NUMBER  
**123-45-1234**

**JOHN JOHNSON**

JOAN JOHNSON  
 123 FIRST ST  
 ANYTOWN, TX 75123

2007 - 1099-INT, INTEREST INCOME  
 ACCOUNT NUMBER

SAVINGS INT  
 BOX 1

INTEREST INCOME 27.74  
 TOTAL INTEREST **27.74**

1099-INT	1099-DIV	1099-OID	1099-MISC	1099-B	*Form 1099-OID: This may not be the correct figure to report on your income tax return. See instructions on back.			
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.					1099-INT, Interest Income, OMB No. 1545-0112	1099-A, Acquisition or Abandonment of Secured Property, OMB 1545-0077	1099-E, Student Loan Interest Statement, OMB No. 1545-1576	
					1099-DIV, Dividends and Distributions, OMB No. 1545-0110	1099-B, Proceeds from Broker and Barter Exchange Transactions, OMB 1545-0715	1099-S, Proceeds from Real Estate Transactions, OMB No. 1545-0987	
					1099-OID, Original Issue Discount, OMB No. 1545-0117	1099-C, Cancellation of Debt, OMB No. 1545-1424	1098, Mortgage Interest Statement, OMB No. 1545-0901	
					1099-MISC, Miscellaneous Income, OMB No. 1545-0115	1098 - MORTGAGE		
1099-A					*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.			
1099-C					The information next to boxes 1, 2, and 3 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.			
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines it has not been reported.								
1099-E								
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest.								
1099-S								
This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported.								

PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS

166971



\*CHHSED6A08348601\*

CORRECTED (if checked)

Y8-173133-3545

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>BANK OF AMERICA, N.A.</b> PO BOX 21848 GREENSBORO NC 27420-1848 1.800.285.6000		Payer's RTN (optional)	OMB No. 1545-0112
PAYER'S Federal identification number <b>74-7654321</b>		RECIPIENT'S identification number <b>123-45-1234</b>	<b>2007</b> <b>Interest Income</b> Form 1099-INT
RECIPIENT'S name, address, and ZIP code  <b>JOHN JOHNSON</b> 123 FIRST ST ANYTOWN TX 75123		1 Interest income \$ <b>19.78</b>	
Account number (see instructions)		3 Interest on U.S. Savings Bonds and Treas. obligations \$	4 Federal income tax withheld \$ <b>.00</b>
		6 Foreign tax paid \$	5 Investment expenses \$
		8 Tax-exempt interest \$	7 Foreign country or U.S. possession
			9 Specified private activity bond interest \$

**Copy B  
For Recipient**


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

Form 1099-INT

(Keep for your records)

Department of the Treasury - Internal Revenue Service

CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>REDSTONE FEDERAL CREDIT UNION</b> 220 WYNN DRIVE HUNTSVILLE, AL 35893 256-722-3640		Payer's RTN (optional)	OMB No. 1545-0112	<b>2007</b> <b>Interest Income</b>
PAYER'S federal identification number <b>74-7654321</b>		1 Interest income \$ <b>137.11</b>	Form <b>1099-INT</b>	
RECIPIENT'S identification number <b>123-45-1234</b>	2 Early withdrawal penalty \$	3 Interest on U.S. Savings Bonds and Treas. obligations \$		
*****3-DIGIT 357 <b>JOHNSON, JOHN</b> 123 FIRST ST ANYTOWN, TX 75123  		4 Federal income tax withheld \$	5 Investment expenses \$	<b>Copy B</b> <b>For Recipient</b> This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
Account number (see instructions)		6 Foreign tax paid \$	7 Foreign country or U.S. possession	
		8 Tax-exempt interest \$	9 Specified private activity bond interest \$	

Form **1099-INT**

(keep for your records)

Department of the Treasury - Internal Revenue Service

### Instructions for Recipient

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Box 1.** Shows taxable interest paid to you during the calendar year by the payer. This does not include interest shown in box 3. May also show the total amount of the credits from clean renewable energy bonds and Gulf tax credit bonds that must be included in your interest income. These amounts were treated as paid to you during 2007 on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912, Credit for Clean Renewable Energy and Gulf Tax Credit Bonds.

**Box 2.** Shows interest or principal forfeited because of early withdrawal of time savings. You may deduct this amount to figure your adjusted gross income on your income tax return. See the instructions for Form 1040 to see where to take the deduction.

**Box 3.** Shows interest on U.S. Savings Bonds, Treasury bills, Treasury bonds, and Treasury notes. This may or may not be all taxable. See Pub. 550, Investment Income and Expenses. This interest is exempt from state and local income taxes. This interest is not included in box 1.

**Box 4.** Shows backup withholding. Generally, a payer must backup withhold at a 28% rate if you did not furnish your taxpayer identification number (TIN) or you did not furnish the correct TIN to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld.

**Box 5.** Any amount shown is your share of investment expenses of a single-class REMIC. If you file Form 1040, you may deduct these expenses on the "Other expenses" line of Schedule A (Form 1040) subject to the 2% limit. This amount is included in box 1.

**Box 6.** Shows foreign tax paid. You may be able to claim this tax as a deduction or a credit on your Form 1040. See your Form 1040 instructions.

**Box 8.** Shows tax-exempt interest, including exempt-interest dividends from a mutual fund or other regulated investment company, paid to you during the calendar year by the payer. Report this amount on line 8b of Form 1040 or Form 1040A. This amount may be subject to backup withholding. See box 4.

**Box 9.** Shows tax-exempt interest subject to the alternative minimum tax. This amount is included in box 8. See the instructions for Form 6251, Alternative Minimum Tax—Individuals.

**Nominees.** If this form includes amounts belonging to another person(s), you are considered a nominee recipient. Complete a Form 1099-INT for each of the other owners showing the income allocable to each. File Copy A of the form with the IRS. Furnish Copy B to each owner. List yourself as the "payer" and the other owner(s) as the "recipient." File Form(s) 1099-INT with Form 1096, Annual Summary and Transmittal of U.S. Information Returns, with the Internal Revenue Service Center for your area. On Form 1096 list yourself as the "filer." A husband or wife is not required to file a nominee return to show amounts owned by the other.



CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no. <b>Procter &amp; Gamble</b> <b>Shareholder Services</b> <b>P O Box 5572</b> <b>Cincinnati, OH, 45201-5572</b>		1a Total ordinary dividends <b>\$ 8.22</b>	OMB No. 1545-0110 <b>2007</b> Form 1099-DIV	<b>Dividends and Distributions</b>
		1b Qualified dividends <b>\$ 8.22</b>		
		2a Total capital gain distr. \$	2b Unrecap. Sec. 1250 gain \$	<b>Copy B For Recipient</b>
PAYER'S Federal identification number <b>74-7654321</b>	RECIPIENT'S identification number <b>123-45-1234</b>			
RECIPIENT'S name <b>JOHN JOHNSON</b>  Street address (including apt. no.) <b>123 FIRST ST</b>  City, state, and ZIP code <b>ANYTOWN TX 75123</b>		2c Section 1202 gain \$	2d Collectibles (28%) gain \$	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported
		3 Nontaxable distributions \$	4 Federal income tax withheld <b>\$ 0.00</b>	
		5 Investment expenses \$	7 Foreign country or U.S. possession \$	
Account number (optional)		6 Foreign tax paid \$	7 Foreign country or U.S. possession \$	
		8 Cash liquidation distributions \$	9 Noncash liquidation distributions \$	

Form 1099-DIV

(keep for your records)

Department of the Treasury - Internal Revenue Service

**Instructions to Recipients**

**Box 1a.** Shows total ordinary dividends that are taxable. Include this amount on line 9a of Form 1040 or 1040A. Also, report it on Schedule B (Form 1040) or Schedule 1 (Form 1040A), if required

The amount shown may be a distribution from an employee stock ownership plan (ESOP). Report it as a dividend on your Form 1040/1040A but treat it as a plan distribution, not as investment income, for any other purpose.

**Box 1b.** Shows the portion of the amount in box 1a that may be eligible for the 15% or 5% capital gains rates. See the Form 1040/1040A instructions for how to determine this amount. Report the eligible amount on line 9b. Form 1040 or 1040A.

**Box 2a.** Shows total capital gain distributions (long-term) from a regulated investment company or real estate investment trust. Report the amounts shown in box 2a on schedule D (Form 1040), line 13. But if **no amount** is shown in boxes 2c-2d and your **only** capital gains and losses are capital gain distributions, you may be able to report the amounts shown in box 2a on line 13 of Form 1040 (line 10 of Form 1040A) rather than Schedule D. See the Form 1040/1040A instructions.

**Box 2b.** Shows the portion of the amount in box 2a that is unrecaptured section 1250 gain from certain depreciable real property. Report this amount on the **Unrecaptured section 1250 Gain Worksheet** in the Schedule D instructions (Form 1040).

**Box 2c.** Shows the portion of the amount in box 2a that is section 1202 gain from certain small business stock that may be subject to a 50% exclusion. See the Schedule D (Form 1040) instructions.

**Box 2d.** Shows 28% rate gain from sales or exchanges of collectibles. If required, use this amount when completing the **28% Rate Gain Worksheet-Line 18** in the instructions for Schedule D (Form 1040).

**Box 3.** Shows the part of the distribution that is nontaxable because it is a return of your cost (or other basis). You must reduce your cost (or other basis) by this amount for figuring gain or loss when you sell your stock. But if you get back all your cost (or other basis), report future nontaxable distributions as capital gains, even though this form shows them as nontaxable. See **Pub. 550**, investment income and expenses.

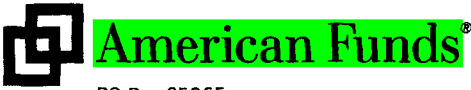
**Box 4.** Shows backup withholding. For example, a payer must backup withhold on certain payments at a 28% rate if you did not give your taxpayer identification number to the payer. See **Form W-9 Request for Taxpayer Identification Number and Certification** for information on backup withholding. **include this amount on your income tax return as tax withheld.**

**Box 5.** Shows your share of expenses of a nonpublicly offered regulated investment company, generally a nonpublicly offered mutual fund. If you file Form 1040, you may deduct these expenses on the 'other expenses' line on Schedule A (Form 10140) subject to the 2% limit. This amount is included in box 1a.

**Box 6.** Shows the foreign tax you may be able to claim as a deduction or a credit on Form 1040. See the Form 1040 instructions.

**Boxes 8 and 9.** Shows cash and noncash liquidation distributions.

**Nominees.** If this form includes amounts belonging to another person, you are considered a nominee recipient. You must file Form 1099-DIV with the IRS for each of the other owners to show their share of the income, and you must furnish a Form 1099-DIV to each. A husband or wife is not required to file a nominee return to show amounts owned by the other. See the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**



PO Box 25065  
 Santa Ana CA 92799-5065

# Form 1099-DIV

OMB NO. 1545-0110

**2007 Dividends  
 and Distributions**

**Copy B**  
 for recipient

**Recipient's name and address**

**JOHN JOHNSON**  
 JOAN JOHNSON  
 123 FIRST ST  
 ANYTOWN TX 75123

**Payer's address and telephone number**

PO Box 25065  
 Santa Ana CA 92799-5065  
 800/421-0180

**Recipient's tax identification number (TIN)**

**123-45-1234**



- This is important tax information and is being furnished to the Internal Revenue Service (IRS). Please keep for your records.
- 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.

Payer (Fund) name and Federal identification number	Recipient's account and fund number	1a Total ordinary dividends	1b Qualified dividends	2a Total capital gain distributions	4 Federal income tax withheld	6 Foreign tax paid
THE CASH MANAGEMENT TRUST OF AMERICA-A		694.52	0.00	0.00	0.00	N/A



Please see reverse side for instructions.





Oppenheimer & Co. Inc.  
 125 Broad Street  
 New York, NY 10004  
 (212) 668-8000  
 Member of All Principal Exchanges

ACCOUNT NUMBER \_\_\_\_\_ TAX ID NUMBER **123-45-1234** PAYERS ID NUMBER: **74-7654321** PAGE 1 OF 2 FOR THE PERIOD 01/01/07 THROUGH 12/31/07  
 YOUR FINANCIAL ADVISOR \_\_\_\_\_  
 OFFICE SERVING YOUR ACCOUNT \_\_\_\_\_  
 500 WEST MADISON  
 SUITE 4000  
 CHICAGO, IL 60661

## CONSOLIDATED 1099

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED.

### 2007 1099-INT INTEREST INCOME

BOX	(OMB NO. 1545-0112)	AMOUNT
1	INTEREST INCOME .....	.00
2	EARLY WITHDRAWAL PENALTY .....	.00
3	INTEREST ON US SAVINGS BONDS AND TREASURY OBLIGATIONS .....	.00
4	FEDERAL INCOME TAX WITHHELD .....	.00
5	INVESTMENT EXPENSES .....	.00
6	FOREIGN TAX PAID .....	.00
7	FOREIGN COUNTRY OR U.S. POSSESSION .....	.00
8	TAX-EXEMPT INTEREST .....	.00
9	SPECIFIED PRIVATE ACTIVITY BOND INTEREST .....	.00

### 2007 1099-DIV DIVIDENDS & DISTRIBUTIONS

BOX	(OMB NO. 1545-0110)	AMOUNT
1A	TOTAL ORDINARY DIVIDENDS .....	846.85
1B	QUALIFIED DIVIDENDS .....	326.10
2A	TOTAL CAPITAL GAIN DISTRIBUTIONS .....	3,122.69
2B	UNRECAPTURED SECTION 1250 GAIN .....	.00
2C	SECTION 1202 GAIN .....	.00
2D	COLLECTIBLES (28%) GAIN .....	.00
3	NONDIVIDEND DISTRIBUTIONS .....	.00
4	FEDERAL INCOME TAX WITHHELD .....	.00
5	INVESTMENT EXPENSES .....	.00
6	FOREIGN TAX PAID .....	.00
7	FOREIGN COUNTRY OR U.S. POSSESSION .....	.00
8	CASH LIQUIDATION DISTRIBUTIONS .....	.00
9	NONCASH LIQUIDATION DISTRIBUTIONS .....	.00

THE INFORMATION PROVIDED MAY NOT AGREE WITH YOUR DECEMBER STATEMENT DUE TO CORRECTIONS MADE AFTER YEAR END, AND/OR RE-ALLOCATION OF INCOME FOR MUTUAL FUNDS AND OTHER SECURITIES

IF YOU OWNED MUTUAL FUNDS, REITS, RICS, CMO, REMICS, OR OTHER SECURITIES THAT TYPICALLY REPORT REVISED TAX INFORMATION UP TO MARCH 15TH, YOU MAY WISH TO POSTPONE FILING A TAX RETURN UNTIL THIS INFORMATION IS RECEIVED

STATE-SPECIFIC MONEY FUND TAX INFORMATION IS AVAILABLE FROM YOUR FINANCIAL ADVISOR.

\*\*\* THIS IS THE END OF THE INFORMATION WE ARE REPORTING TO THE IRS \*\*\*

<b>ACCOUNT NUMBER</b>	<b>PAYERS ID NUMBER: 74-7654321</b>	<b>PAGE 2 OF 2</b>	<b>FOR THE PERIOD</b>
	123-45-1234	01/01/07 THROUGH 12/31/07	



THE FOLLOWING OVERVIEW OF ACTIVITY IN YOUR ACCOUNT IS PROVIDED FOR YOUR CONVENIENCE.

**D I V I D E N D S**

CUSIP	DESCRIPTION	1A)TOTAL DIVIDENDS	1B)QUALIFIED DIV
	ADVANTAGE PRIMARY LIQ FD	7.05	.00
	FEDERATED KAUFMANN FD CL C	670.45	156.75
	FIDELITY ADV FINL SVCS CL B	8.89	8.89
	FIDELITY ADV FINANCIAL	45.29	45.29
	SERVICES FD CL A		
	GROWTH FUND AMERICA INCORP	115.17	115.17
	<b>TOTAL DIVIDENDS</b>	<b>846.85</b>	<b>326.10</b>

**C A P I T A L G A I N S**

CUSIP	DESCRIPTION	2A)TOTAL GAIN	2B)SECTION 1250	2C)SECTION 1202
	FEDERATED KAUFMANN FD CL C	1,959.97	.00	.00
	FIDELITY ADV FINL SVCS CL B	418.70	.00	.00
	FIDELITY ADV FINANCIAL	84.69	.00	.00
	SERVICES FD CL A			
	GROWTH FUND AMERICA INCORP	659.33	.00	.00
	<b>TOTAL CAPITAL GAINS</b>	<b>3,122.69</b>	<b>.00</b>	<b>.00</b>

\*\*\* THIS IS THE END OF YOUR 1099 DOCUMENT. WE THANK YOU FOR BEING A VALUED CLIENT \*\*\*

**NBC Securities, Inc.**  
 1927 First Avenue North  
 Birmingham, AL 35203

PAYER'S IDENTIFICATION NUMBER:

**JOHN JOHNSON**  
 JOAN JOHNSON  
 123 FIRST ST  
 ANYTOWN TX 75123

TELEPHONE NUMBER (256) 713-1411  
 GREG MUSSO 06B

Recipient's Identification Number **123-45-1234**  
 Account Number

PAGE 1 OF 5

**2007 COMPOSITE FORM 1099**

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

<b>1099-DIV: DIVIDENDS AND DISTRIBUTIONS</b>	
OMB No. 1545-0110	
Box 1a: Total Ordinary Dividends	\$2,957.37
Box 1b: Qualified Dividends	\$2,696.60
Box 2a: Total Capital Gain Distr.	\$0.00
Box 2b: Unrecap. Sec. 1250 Gain	\$0.00
Box 2c: Section 1202 Gain	\$0.00
Box 2d: Collectibles (28%) Gain	\$0.00
Box 3: Nontaxable Distributions	\$0.00
<b>Box 4: Federal Income Tax Withheld</b>	<b>\$0.00</b>
Box 5: Investment Expenses	\$0.00
Box 6: Foreign Tax Paid	\$1.20
Box 8: Cash Liquidation Distributions	\$0.00
Box 9: Noncash Liquidation Distributions	\$0.00

<b>1099-MISC: MISCELLANEOUS INCOME</b>	
OMB No. 1545-0115	
Box 1: Rents	\$0.00
Box 2: Royalties	\$0.00
Box 3: Other Income	\$0.00
<b>Box 4: Federal Income Tax Withheld</b>	<b>\$0.00</b>
Box 8: Substitute Payments in lieu of Dividends or Interest	\$0.00

<b>1099-INT: INTEREST INCOME</b>	
OMB No. 1545-0112	
Box 1: Interest Income	\$0.00
Box 2: Early Withdrawal Penalty	\$0.00
Box 3: Interest on U.S. Savings Bonds and Treas. Obligations	\$0.00
<b>Box 4: Federal Income Tax Withheld</b>	<b>\$0.00</b>
Box 5: Investment Expenses	\$0.00
Box 6: Foreign Tax Paid	\$0.00
Box 8: Tax-Exempt Interest	\$0.00
Box 9: Specified Private Activity Bond Interest. Amount Subject to AMT.	\$0.00

<b>1099-B: PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS</b>		
OMB No. 1545-0715		
Total	Gross Proceeds Less Commissions and Option Premiums - Each Transaction furnished to the IRS.	\$38,027.80
<b>Box 4: Federal Income Tax Withheld</b>		<b>\$0.00</b>
Box 8: Profit or Loss Realized in 2007		\$0.00
Box 9: Unrealized Profit or Loss on open contracts - 12/31/06		\$0.00
Box 10: Unrealized Profit or Loss on open contracts - 12/31/07		\$0.00
Box 11: Aggregate Profit or Loss		\$0.00

<b>1099-OID: ORIGINAL ISSUE DISCOUNT</b>		
OMB No. 1545-0117		
Total	Original Issue Discount for 2007 - Each transaction furnished to IRS	\$0.00
Total	Other Periodic Interest - Each total furnished to IRS	\$0.00
<b>Box 4: Federal Income Tax Withheld</b>		<b>\$0.00</b>
Total	Original Issue Discount on U.S. Treasury Obligations - Each Transaction furnished to IRS	\$0.00
Box 7: Investment Expenses		\$0.00

1099-DIV: DIVIDENDS AND DISTRIBUTIONS

OMB No. 1545-0110

DETAIL ACTIVITY

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

PAYABLE DATE	CUSIP	DESCRIPTION	ACTIVITY	AMOUNT	IRS BOX
02/28/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$145.08	1A
03/30/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$22.69	1A
04/30/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$15.82	1A
05/31/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$13.78	1A
06/29/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$13.82	1A
07/27/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$10.98	1A
08/31/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$9.90	1A
09/28/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$6.44	1A
10/31/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$6.84	1A
11/30/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$4.92	1A
12/31/2007		GOLDMAN SACHS FS MONEY MKT	MNY MKT DIV	\$10.50	1A
06/01/2007		ALLETE INC	QUALIFIED DIVIDEND	\$53.30	1A
09/04/2007		ALLETE INC	QUALIFIED DIVIDEND	\$53.30	1A
12/03/2007		ALLETE INC	QUALIFIED DIVIDEND	\$53.30	1A
05/18/2007		AMERIPRISE FINANCIAL	QUALIFIED DIVIDEND	\$16.50	1A
08/17/2007		AMERIPRISE FINANCIAL	QUALIFIED DIVIDEND	\$16.50	1A
11/16/2007		AMERIPRISE FINANCIAL	QUALIFIED DIVIDEND	\$16.50	1A
06/15/2007		ASHLAND INC	QUALIFIED DIVIDEND	\$27.50	1A
09/17/2007		ASHLAND INC	QUALIFIED DIVIDEND	\$27.50	1A
12/17/2007		ASHLAND INC	QUALIFIED DIVIDEND	\$27.50	1A
05/30/2007		CIT GROUP, INC.	QUALIFIED DIVIDEND	\$27.50	1A
09/28/2007		CHICAGO BRIDGE & IRON CO	QUALIFIED DIVIDEND	\$4.00	1A
12/28/2007		CHICAGO BRIDGE & IRON CO	QUALIFIED DIVIDEND	\$4.70	1A
12/31/2007		CHICAGO BRIDGE & IRON CO	QUALIFIED DIVIDEND	\$4.70	1A
12/31/2007		CHICAGO BRIDGE & IRON CO	QUALIFIED DIVIDEND	\$4.00	1A
05/01/2007		DILLARDS INC-CL A	QUALIFIED DIVIDEND	\$7.60	1A
08/01/2007		DILLARDS INC-CL A	QUALIFIED DIVIDEND	\$7.60	1A
11/01/2007		DILLARDS INC-CL A	QUALIFIED DIVIDEND	\$7.60	1A
03/16/2007		FLOWERS FOODS INC	QUALIFIED DIVIDEND	\$27.50	1A
06/29/2007		FLOWERS FOODS INC	QUALIFIED DIVIDEND	\$41.25	1A
09/21/2007		FLOWERS FOODS INC	QUALIFIED DIVIDEND	\$41.25	1A
12/14/2007		FLOWERS FOODS INC	QUALIFIED DIVIDEND	\$41.25	1A
11/15/2007		HARSCO CORP	QUALIFIED DIVIDEND	\$10.65	1A
04/02/2007		ITT CORPORATION	QUALIFIED DIVIDEND	\$15.40	1A
07/02/2007		ITT CORPORATION	QUALIFIED DIVIDEND	\$15.40	1A
10/01/2007		ITT CORPORATION	QUALIFIED DIVIDEND	\$15.40	1A
06/07/2007		IDEARC INC.	QUALIFIED DIVIDEND	\$58.23	1A
09/07/2007		IDEARC INC.	QUALIFIED DIVIDEND	\$58.23	1A
12/13/2007		IDEARC INC.	QUALIFIED DIVIDEND	\$58.23	1A
03/30/2007		MARTIN MARIETTA MATERIALS	QUALIFIED DIVIDEND	\$13.75	1A
06/29/2007		MARTIN MARIETTA MATERIALS	QUALIFIED DIVIDEND	\$13.75	1A
09/28/2007		MARTIN MARIETTA MATERIALS	QUALIFIED DIVIDEND	\$17.25	1A
12/31/2007		MARTIN MARIETTA MATERIALS	QUALIFIED DIVIDEND	\$17.25	1A
04/02/2007		MONEYGRAM INTL INC.	QUALIFIED DIVIDEND	\$11.00	1A

FORM 1099-DIV (01/07)

**1099-DIV: DIVIDENDS AND DISTRIBUTIONS**      OMB No. 1545-0110      **DETAIL ACTIVITY**

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

PAYABLE DATE	CUSIP	DESCRIPTION	ACTIVITY	AMOUNT	IRS BOX
07/02/2007		MONEYGRAM INTL INC.	QUALIFIED DIVIDEND	\$11.00	1A
08/20/2007		MUELLER WATER PRODUCTS	QUALIFIED DIVIDEND	\$1.75	1A
11/20/2007		MUELLER WATER PRODUCTS	QUALIFIED DIVIDEND	\$3.50	1A
05/25/2007		OSHKOSH TRUCK CORP	QUALIFIED DIVIDEND	\$12.00	1A
08/23/2007		OSHKOSH TRUCK CORP	QUALIFIED DIVIDEND	\$12.00	1A
11/26/2007		OSHKOSH TRUCK CORP	QUALIFIED DIVIDEND	\$12.00	1A
04/13/2007		PIONEER NATURAL RESOURCES CO	QUALIFIED DIVIDEND	\$20.80	1A
10/12/2007		PIONEER NATURAL RESOURCES CO	QUALIFIED DIVIDEND	\$22.40	1A
03/12/2007		ROCKWELL AUTOMATION INC	QUALIFIED DIVIDEND	\$29.00	1A
06/04/2007		ROCKWELL AUTOMATION INC	QUALIFIED DIVIDEND	\$29.00	1A
09/04/2007		ROCKWELL AUTOMATION INC	QUALIFIED DIVIDEND	\$29.00	1A
12/10/2007		ROCKWELL AUTOMATION INC	QUALIFIED DIVIDEND	\$29.00	1A
03/30/2007		THE ST JOE COMPANY	QUALIFIED DIVIDEND	\$19.20	1A
06/29/2007		THE ST JOE COMPANY	QUALIFIED DIVIDEND	\$19.20	1A
03/15/2007		TEMPLE - INLAND INC	QUALIFIED DIVIDEND	\$36.40	1A
06/15/2007		TEMPLE - INLAND INC	QUALIFIED DIVIDEND	\$36.40	1A
09/14/2007		TEMPLE - INLAND INC	QUALIFIED DIVIDEND	\$36.40	1A
12/14/2007		TEMPLE - INLAND INC	QUALIFIED DIVIDEND	\$36.40	1A
12/26/2007		TEMPLE - INLAND INC	QUALIFIED DIVIDEND	\$1,332.50	1A
04/02/2007		TEXTRON INC	QUALIFIED DIVIDEND	\$27.13	1A
07/02/2007		TEXTRON INC	QUALIFIED DIVIDEND	\$27.13	1A
10/01/2007		TEXTRON INC	QUALIFIED DIVIDEND	\$32.20	1A
09/20/2007		WABCO HOLDINGS INC	QUALIFIED DIVIDEND	\$3.50	1A
12/20/2007		WABCO HOLDINGS INC	QUALIFIED DIVIDEND	\$3.50	1A
03/16/2007		WALTER INDUSTRIES INC	QUALIFIED DIVIDEND	\$13.50	1A
06/08/2007		WALTER INDUSTRIES INC	QUALIFIED DIVIDEND	\$13.50	1A
09/14/2007		WALTER INDUSTRIES INC	QUALIFIED DIVIDEND	\$13.50	1A
12/07/2007		WALTER INDUSTRIES INC	QUALIFIED DIVIDEND	\$13.50	1A
09/04/2007		WYNDHAM WORLDWIDE CORPORATION	QUALIFIED DIVIDEND	\$7.60	1A
12/04/2007		WYNDHAM WORLDWIDE CORPORATION	QUALIFIED DIVIDEND	\$7.60	1A

<b>QUALIFIED DIVIDENDS SUBTOTAL</b>	\$2,696.60
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<b>NON-QUALIFIED DIVIDENDS SUBTOTAL, INCLUDES ANY SHORT TERM CAP GAINS</b>	\$260.77
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<b>BOX 1A: TOTAL ORDINARY DIVIDENDS</b>	\$2,957.37
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<b>BOX 1B: QUALIFIED DIVIDENDS, THIS AMOUNT INCLUDED IN BOX 1A</b>	\$2,696.60
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09/28/2007	167250109	CHICAGO BRIDGE & IRON CO	FOREIGN PAID	\$0.60	6
12/28/2007	167250109	CHICAGO BRIDGE & IRON CO	FOREIGN PAID	\$0.70	6
12/31/2007	167250109	CHICAGO BRIDGE & IRON CO	FOREIGN PAID	\$0.70	6
12/31/2007	167250109	CHICAGO BRIDGE & IRON CO	FOREIGN PAID	\$0.60	6

<b>BOX 6: TOTAL FOREIGN TAX PAID</b>	\$1.20
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## 1099-B: PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS

## DETAIL ACTIVITY

OMB No. 1545-0715

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

(Box 1A) DATE OF SALE	(Box 1B) CUSIP	(Box 5) QUANTITY	SYMBOL	(Box 7) DESCRIPTION		(Box 2) AMOUNT
12/05/2007		100.00	ASH	ASHLAND INC	SLD	\$4,786.93
08/03/2007		110.00	CIT	CIT GROUP, INC.	SLD	\$3,943.43
08/27/2007		320.00	CNO	CONSECO INC.	SLD	\$4,533.82
12/05/2007		190.00	DDS	DILLARDS INC-CL A	SLD	\$3,849.34
12/05/2007		170.00	IAR	IDEARC INC.	SLD	\$2,779.45
08/27/2007		220.00	MGI	MONEYGRAM INTL INC.	SLD	\$4,787.71
08/28/2007		120.00	JOE	THE ST JOE COMPANY	SLD	\$3,695.16
12/21/2007		130.00	TIN	TEMPLE - INLAND INC	SLD	\$3,995.73
12/05/2007		190.00	WYN	WYNDHAM WORLDWIDE CORPORATION	SLD	\$5,656.23

Each transaction furnished to the IRS

TOTAL GROSS PROCEEDS LESS COMMISSIONS

\$38,027.80

## 2007 SUPPLEMENTAL TAX INFORMATION:

NON-REPORTABLE

The following information is not being reported to the Internal Revenue Service. We are providing it to you as it may prove helpful when preparing your 2007 tax return. Again, this is only being provided as a convenience to you and is not being provided to the Internal Revenue Service.

DATE	CUSIP	QUANTITY	SYMBOL	DESCRIPTION	AMOUNT
<b>PURCHASES</b>					
02/20/2007		130.00	ALE	ALLETE INC	\$6,320.59
02/20/2007		110.00	AMP	AMERIPRISE FINANCIAL	\$6,908.88
02/20/2007		100.00	ASH	ASHLAND INC	\$6,835.90
02/20/2007		110.00	CIT	CIT GROUP, INC.	\$6,592.59
02/20/2007		260.00	CXG	CNX GAS CORP	\$6,398.60
08/31/2007		100.00	CBI	CHICAGO BRIDGE & IRON CO	\$3,621.42
02/20/2007		320.00	CNO	CONSECO INC.	\$6,467.17
02/20/2007		190.00	DDS	DILLARDS INC-CL A	\$6,723.53
02/20/2007		220.00	FLO	FLOWERS FOODS INC	\$6,481.18
08/30/2007		60.00	HSC	HARSCO CORP	\$3,268.77
02/20/2007		110.00	ITT	ITT CORPORATION	\$6,660.50
03/12/2007		170.00	IAR	IDEARC INC.	\$5,789.18
12/10/2007		110.00	IWS	ISHARES RUSSELL MIDCAP INDEX	\$15,786.10
02/20/2007		50.00	MLM	MARTIN MARIETTA MATERIALS	\$6,412.50
02/20/2007		220.00	MGI	MONEYGRAM INTL INC.	\$6,448.18
07/10/2007		100.00	MWA B	MUELLER WATER PRODUCTS	\$1,501.36
08/15/2007		100.00	MWA B	MUELLER WATER PRODUCTS	\$1,175.28
02/20/2007		120.00	OSK	OSHKOSH TRUCK CORP	\$6,597.59
02/20/2007		160.00	PXD	PIONEER NATURAL RESOURCES CO	\$6,393.58
02/20/2007		100.00	ROK	ROCKWELL AUTOMATION INC	\$6,513.16
02/20/2007		20.00	JOE	THE ST JOE COMPANY	\$1,094.60
08/30/2007		50.00	SGR	SHAW GROUP INC	\$2,492.12
08/31/2007		60.00	SGR	SHAW GROUP INC	\$2,880.04
08/31/2007		30.00	SGR	SHAW GROUP INC	\$1,440.02
02/20/2007		130.00	TIN	TEMPLE - INLAND INC	\$6,688.37
12/27/2007		90.00	TDC	TEREDATA CORP	\$2,409.99
02/20/2007		70.00	TXT	TEXTRON INC	\$6,848.21
08/09/2007		50.00	WBC	WABCO HOLDINGS INC	\$2,362.46
02/20/2007		270.00	WLT	WALTER INDUSTRIES INC	\$6,571.77
02/20/2007		190.00	WYN	WYNDHAM WORLDWIDE CORPORATION	\$6,640.50
<b>TOTAL PURCHASES</b>					<b>\$162,324.14</b>

MERRILL LYNCH BANK & TRUST CO., FSB  
 WAL-MART PROFIT SHARING AND 40  
 PO BOX 1551  
 PENNINGTON NJ 08534

RECIPIENT'S name, Street address (including apt. no.)  
 City, state, and ZIP code

\*\*\*\*\*AUTO\*\*3-DIGIT 358  
**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

<b>Account Number:</b>		<input type="checkbox"/> CORRECTED (if checked)	OMB No. 1545-0119
1 Gross distribution	PAYER'S Federal identification number	2007	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
\$ 54,323.73	74-7654321		
2a Taxable amount	RECIPIENT'S Identification number	Form1099-R	
\$ 0.00	123-45-1234		
2b Taxable amount not determined <input type="checkbox"/>	Total distribution <input checked="" type="checkbox"/>	Copy 2 File this copy with your state, city, or local income tax return, when required	
3 Capital gain (included in box 2a)	4 Federal income tax withheld		
5 Employee/Desig. Roth contrib. or ins. premium	6 Net unrealized appreciation in employer's securities		
7 Distribution code(s)	IRA/SEP/SIMPLE <input type="checkbox"/>	8 Other	1st year of desig. Roth contrib. %
G			
9a Your percentage of total distribution %	9b Total employee contributions		
10 State tax withheld	11 State/Payer's state no.	12 State distribution	
	AL / 354-766		
13 Local tax withheld	14 Name of locality	15 Local distribution	

Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, and ZIP code

**MERRILL LYNCH BANK & TRUST CO., FSB**  
**WAL-MART PROFIT SHARING AND 40**  
**PO BOX 1551**  
**PENNINGTON NJ 08534**

RECIPIENT'S name, Street address (including apt. no.)  
 City, state, and ZIP code

**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

<b>Account Number:</b>		<input type="checkbox"/> CORRECTED (if checked)	OMB No. 1545-0119
1 Gross distribution	PAYER'S Federal identification number	2007	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
\$ 54,323.73	74-7654321		
2a Taxable amount	RECIPIENT'S Identification number	Form1099-R	
\$ 0.00	123-45-1234		
2b Taxable amount not determined <input type="checkbox"/>	Total distribution <input checked="" type="checkbox"/>	Copy B Report this income on your federal tax return.	
3 Capital gain (included in box 2a)	4 Federal income tax withheld	If this form shows federal income tax withheld in Box 4, attach this copy to your return.	
5 Employee/Desig. Roth contrib. or ins. premium	6 Net unrealized appreciation in employer's securities		
7 Distribution code(s)	IRA/SEP/SIMPLE <input type="checkbox"/>	8 Other	1st year of desig. Roth contrib. %
G			
9a Your percentage of total distribution %	9b Total employee contributions		
10 State tax withheld	11 State/Payer's state no.	12 State distribution	
	AL / 354-766		
13 Local tax withheld	14 Name of locality	15 Local distribution	

Department of the Treasury - Internal Revenue Service

PAYER'S name, street address, city, state, and ZIP code

**MERRILL LYNCH BANK & TRUST CO., FSB**  
**WAL-MART PROFIT SHARING AND 40**  
**PO BOX 1551**  
**PENNINGTON NJ 08534**

RECIPIENT'S name, Street address (including apt. no.)  
 City, state, and ZIP code

**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

<b>Account Number:</b>		<input type="checkbox"/> CORRECTED (if checked)	OMB No. 1545-0119
1 Gross distribution	PAYER'S Federal identification number	2007	Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.
\$ 54,323.73	74-7654321		
2a Taxable amount	RECIPIENT'S Identification number	Form1099-R	
\$ 0.00	123-45-1234		
2b Taxable amount not determined <input type="checkbox"/>	Total distribution <input checked="" type="checkbox"/>	Copy C For Recipient's Records.	
3 Capital gain (included in box 2a)	4 Federal income tax withheld		
5 Employee/Desig. Roth contrib. or ins. premium	6 Net unrealized appreciation in employer's securities		
7 Distribution code(s)	IRA/SEP/SIMPLE <input type="checkbox"/>	8 Other	1st year of desig. Roth contrib. %
G			
9a Your percentage of total distribution %	9b Total employee contributions		
10 State tax withheld	11 State/Payer's state no.	12 State distribution	
	AL / 354-766		
13 Local tax withheld	14 Name of locality	15 Local distribution	

Department of the Treasury - Internal Revenue Service

0076145

This information is being furnished to the Internal Revenue Service



CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code, and telephone # (800) 669-2136  
**WACHOVIA BANK, N.A.**  
**401 SOUTH TRYON STREET**  
**CHARLOTTE, NC 28288-1164**

PAYER'S Federal Identification number **74-7654321** RECIPIENT'S Identification number **123-45-1234**

RECIPIENT'S name, address, and ZIP code  
**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

Account number (see instructions) 1st Year of desig. Roth Contrib.

Form 1099-R Department of the Treasury- Internal Revenue Service

1 Gross Distribution \$ <b>4,325.22</b>	2b Taxable amount not determined <input checked="" type="checkbox"/>
2a Taxable amount \$ <b>4,325.22</b>	Total distribution <input type="checkbox"/>
3 Capital gain (Included in box 2a) \$	4 Federal income tax withheld \$ <b>432.52</b>
5 Employee/Roth Designated contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$
7 Distribution code(s) 7	IRA/SEP/SIMPLE X
8 Other \$ %	
9a Your percentage of total distribution %	9b Total employee contributions \$
10 State tax withheld \$	11 State/Payer's state no. \$
13 Local tax withheld \$	14 Name of locality \$
	15 Local distribution \$

OMB No. 1545-0119  
**2007**  
 Form 1099-R  
 Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.  
 This information is being furnished to the Internal Revenue Service

**COPY B**  
 Report this income on your Federal tax return. If this form shows Federal income tax withheld in Box 4, attach this copy to your return.

CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code, and telephone # (800) 669-2136  
**WACHOVIA BANK, N.A.**  
**401 SOUTH TRYON STREET**  
**CHARLOTTE, NC 28288-1164**

PAYER'S Federal Identification number **74-7654321** RECIPIENT'S Identification number **123-45-1234**

RECIPIENT'S name, address, and ZIP code  
**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

Account number (see instructions) 1st Year of desig. Roth Contrib.

Form 1099-R Department of the Treasury- Internal Revenue Service

1 Gross Distribution \$ <b>4,325.22</b>	2b Taxable amount not determined <input checked="" type="checkbox"/>
2a Taxable amount \$ <b>4,325.22</b>	Total distribution <input type="checkbox"/>
3 Capital gain (Included in box 2a) \$	4 Federal income tax withheld \$ <b>432.52</b>
5 Employee/Roth Designated contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$
7 Distribution code(s) 7	IRA/SEP/SIMPLE X
8 Other \$ %	
9a Your percentage of total distribution %	9b Total employee contributions \$
10 State tax withheld \$	11 State/Payer's state no. \$
13 Local tax withheld \$	14 Name of locality \$
	15 Local distribution \$

OMB No. 1545-0119  
**2007**  
 Form 1099-R  
 Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.  
 This information is being furnished to the Internal Revenue Service

**COPY C**  
 For Recipient's Records

CORRECTED (if checked)

PAYER'S name, street address, city, state, and ZIP code, and telephone # (800) 669-2136  
**WACHOVIA BANK, N.A.**  
**401 SOUTH TRYON STREET**  
**CHARLOTTE, NC 28288-1164**

PAYER'S Federal Identification number **74-7654321** RECIPIENT'S Identification number **123-45-1234**

RECIPIENT'S name, address, and ZIP code  
**JOHNSON, JOHN**  
**123 FIRST ST**  
**ANYTOWN TX 75123**

Account number (see instructions) 1st Year of desig. Roth Contrib.

Form 1099-R Department of the Treasury- Internal Revenue Service

1 Gross Distribution \$ <b>4,325.22</b>	2b Taxable amount not determined <input checked="" type="checkbox"/>
2a Taxable amount \$ <b>4,325.22</b>	Total distribution <input type="checkbox"/>
3 Capital gain (Included in box 2a) \$	4 Federal income tax withheld \$ <b>432.52</b>
5 Employee/Roth Designated contributions or insurance premiums \$	6 Net unrealized appreciation in employer's securities \$
7 Distribution code(s) <b>7</b>	IRA/SEP/SIMPLE X
8 Other \$ %	
9a Your percentage of total distribution %	9b Total employee contributions \$
10 State tax withheld \$	11 State/Payer's state no. \$
13 Local tax withheld \$	14 Name of locality \$
	15 Local distribution \$

OMB No. 1545-0119  
**2007**  
 Form 1099-R  
 Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.  
 This information is being furnished to the Internal Revenue Service

**COPY 2**  
 File this copy with your state, city, or local income tax return, when required

# FORM SSA-1099 – SOCIAL SECURITY BENEFIT STATEMENT

## 2007

• PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME.  
• SEE THE REVERSE FOR MORE INFORMATION.

Box 1. Name <b>JOAN JOHNSON</b>		Box 2. Beneficiary's Social Security Number <b>123-45-4567</b>
Box 3. Benefits Paid in 2007 <b>\$11,214.50</b>	Box 4. Benefits Repaid to SSA in 2007 <b>NONE</b>	Box 5. Net Benefits for 2007 (Box 3 minus Box 4) <b>\$11,214.50</b>
<b>DESCRIPTION OF AMOUNT IN BOX 3</b>  Paid by check or direct deposit <b>\$9,207.00</b> Medicare Part B premiums deducted from your benefits <b>\$1,028.50</b> Medicare Advantage premiums (Part C) deducted from your benefits <b>\$814.00</b> Medicare Prescription Drug premiums (Part D) deducted from your benefits \$165.00 Total Additions \$11,214.50 Benefits for 2007 <b>\$11,214.50</b>		<b>DESCRIPTION OF AMOUNT IN BOX 4</b>  <p style="text-align: center;"><b>NONE</b></p>
		Box 6. Voluntary Federal Income Tax Withheld  <b>NONE</b>
		Box 7. Address <b>JOAN JOHNSON</b> <b>123 FIRST ST</b> <b>ANYTOWN TX 75123</b>
		Box 8. Claim Number (Use this number if you need to contact SSA.)  <b>123-45-4567</b>

C01269839-1160269315

C01269839-1160269315

CORRECTED (if checked)



PAYER'S name, street address, city, state, ZIP code, and telephone no.  Controls, Inc. PO Box 85 Valley, CA 91685		1 Rents \$	OMB No. 1545-0115  <b>2007</b> Form 1099-MISC	<b>Miscellaneous Income</b>	
		2 Royalties \$	4 Federal income tax withheld \$		
PAYER'S federal identification number 74-7654321		3 Other income \$	5 Fishing boat proceeds \$	6 Medical and health care payments \$	<b>Copy B For Recipient</b>
RECIPIENT'S identification number 123-45-1234		7 Nonemployee compensation \$ 4456.25	8 Substitute payments in lieu of dividends or interest \$	This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.	
RECIPIENT'S name  JOHN JOHNSON		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
Street address (including apt. no.) 123 FIRST ST		11	12		
City, state, and ZIP code ANYTOWN TX 75123		13 Excess golden parachute payments \$	14 Gross proceeds paid to an attorney \$		
Account number (see instructions)		15a Section 409A deferrals \$	15b Section 409A income \$	16 State tax withheld \$	17 State/Payer's state no.
				18 State income \$	

Form 1099-MISC

(keep for your records)

Department of the Treasury - Internal Revenue Service

Schedule K-1 (Form 1120S)

2007

Final K-1

Amended K-1

Department of the Treasury Internal Revenue Service

For calendar year 2007, or tax year beginning \_\_\_\_\_, 2007 ending \_\_\_\_\_,

Shareholder's Share of Income, Deductions, Credits, etc. See page 2 of form and separate instructions.

**Part I Information About the Corporation**

A Corporation's employer identification number  
75-1234567

B Corporation's name, address, city, state, and ZIP code  
American Agency Inc.  
1234 Fifth Ave  
Downtown, TX 75987

C IRS Center where corporation filed return  
Ogden, UT

**Part II Information About the Shareholder**

D Shareholder's identifying number  
123-45-1234

E Shareholder's name, address, city, state, and ZIP code  
John Johnson  
123 FIRST ST  
ANYTOWN, TX 75123

F Shareholder's percentage of stock ownership for tax year ..... 100 %

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items		
1	Ordinary business income (loss)	13 Credits
		72,510.
2	Net rental real estate income (loss)	
3	Other net rental income (loss)	
4	Interest income	
5a	Ordinary dividends	
5b	Qualified dividends	14 Foreign transactions
6	Royalties	
7	Net short-term capital gain (loss)	
8a	Net long-term capital gain (loss)	
8b	Collectibles (28%) gain (loss)	
8c	Unrecaptured section 1250 gain	
9	Net section 1231 gain (loss)	
10	Other income (loss)	15 Alternative minimum tax (AMT) items
		A -4,784.
11	Section 179 deduction	16 Items affecting shareholder basis
	1,034.	C 698.
12	Other deductions	
	A 430.	D 50,354.
		17 Other information

\*See attached statement for additional information.

BAA For Paperwork Reduction Act Notice, see Instructions for Form 1120S. Shareholder 1

Schedule K-1 (Form 1120S) 2007

FOR IRS USE ONLY

Form 1098 Instructions

RECIPIENT'S/LENDER'S name, address, and telephone number

**COUNTRYWIDE HOME LOANS**  
**CUSTOMER SERVICE**  
 PO BOX 5170  
 SIMI VALLEY, CA 93062-5170  
 (800) 669-6607

RECIPIENT'S federal identification no.      PAYER'S social security number  
 74-7654321      123-45-1234

PAYER'S/BORROWER'S name, Street address (including apt. no.), City, state, and ZIP code

JOHN & JOAN JOHNSON  
 123 FIRST ST  
 ANYTOWN, TX 75123

Account number (see instructions)

**\*Caution:** The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person.

OMB No. 1545-0901

CHL Web Equivalent

**2007 FORM 1098**

**Mortgage Interest Statement**

1 Mortgage interest received from payer(s)/borrower(s)\*

**\$5,093.78**

2 Points paid on purchase of principal residence\*\*

**\$0.00**

3 Refund of overpaid interest

**\$**

4 Mortgage insurance premiums

**\$0.00**

5

**Copy B For Payer**

The information in boxes 1, 2, 3, and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return.

Department of the Treasury - Internal Revenue Service

**2007 Statement Summary for Account**

Total interest paid in 2007	<b>\$5,093.78</b>	Beginning escrow balance	<b>\$771.12</b>
Property taxes paid in 2007	<b>\$1,350.96</b>	Ending escrow balance	<b>\$655.48</b>
Ending principal balance	<b>\$86,043.55</b>	FHAVA case number	<b>Not applicable</b>

\*NOTE: Escrow balance is not an average amount. You will be notified on your next Escrow Analysis if an overage exists.

\*\*Points paid in connection with a refinance may be deductible. Please consult your tax advisor for more details.

\*\*\*Seller paid points paid in connection with a closing may be deductible by the borrower. The seller points have been included in BOX 2 of the 1098. This information is provided for your convenience and should not be considered tax advice. Please consult your tax advisor for more details.

We may charge you a fee for any payment returned or rejected by your financial institution, subject to applicable law.

**CHL Web Equivalent Form 1098 Instructions and Regulations**

**Instructions for Payer/Borrower**

**What's new.** See the instructions for box 4 for an additional interest deduction which may be available to you.

A person (including a financial institution, a governmental unit, and a cooperative housing corporation) who is engaged in a trade or

**WACHOVIA**

**WACHOVIA BANK, N.A.**  
P.O. BOX 13327  
ROANOKE, VA 24040-0001

PAGE 1 OF 1

(800) 249-3869

E.I.N. 74-7654321

JOHN JOHNSON  
JOAN JOHNSON  
123 FIRST ST  
ANYTOWN

TX 75123

FOR CALENDAR YEAR  
2007

TAXPAYER ID NUMBER  
123-45-1234

2007 - 1098, MORTGAGE INTEREST STATEMENT

	ACCOUNT NUMBER	
EQUITY LINES		
BOX 1	MORTGAGE INTEREST	2,626.18 *
	TOTAL INTEREST/POINTS PAID	2,626.18

If your name or Social Security number is incorrect, please call the number listed above or contact your local Wachovia branch.

THIS IS IMPORTANT TAX INFORMATION AND IS BEING FURNISHED TO THE INTERNAL REVENUE SERVICE. IF YOU ARE REQUIRED TO FILE A RETURN, A NEGLIGENCE PENALTY OR OTHER SANCTION MAY BE IMPOSED ON YOU IF THIS INCOME IS TAXABLE AND THE IRS DETERMINES THAT IT HAS NOT BEEN REPORTED OR THAT AN UNDERPAYMENT OF TAX RESULTS BECAUSE YOU OVERSTATED A DEDUCTION FOR THIS MORTGAGE INTEREST OR FOR THESE POINTS OR BECAUSE YOU DID NOT REPORT THIS REFUND OF INTEREST ON YOUR RETURN. FOR PRIVACY ACT AND PAPERWORK REDUCTION ACT NOTICE AND INSTRUCTIONS FOR COMPLETING THIS FORM, SEE THE 2007 INSTRUCTIONS FOR FORMS 1099, 1098, 5498, AND W-2G.

1099-DIV (OMB No.1545-0110),1099-INT (OMB No.1545-0112),1099-MISC (OMB No.1545-0115), 1099-OID (OMB No.1545-0117), 1099-B (OMB No.1545-0715),1099-C (OMB No.1545-1424),1099-A (OMB No.1545-0877),1098 (OMB No. 1545-0901),1098-E (OMB No. 1545-1576)