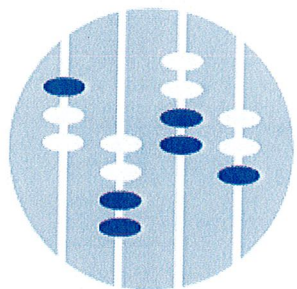


2020 Individual Taxpayer Organizer



SHELTRA TAX & ACCOUNTING, LLC

Taxpayer <u>NANCY J Dumont</u>				SSN <u>030-64-0942</u>			
First		M.I.		Last		Email	
Occupation <u>Realtor/prop. mgmt</u>		Date of birth <u>03/05/73</u>		Are you new to our firm? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		IP PIN	
Address <u>1241 Taber Hill Rd.</u>		City <u>Stowe</u>		State <u>VT</u>		Zip <u>05672</u>	
County <u>LAMONVILLE</u>		Home phone		Work or cell <u>802 793-1430</u>			
Driver's License No.		State <u>VT</u>		Issue Date		Exp. Date	
Spouse <u>N/A</u>				SSN			
First		M.I.		Last		Email	
Occupation		Date of birth		Are you new to our firm? Yes <input type="checkbox"/> No <input type="checkbox"/>		IP PIN	
Address <small>(if different from Taxpayer)</small>		City		State		Zip	
County		Home phone		Work or cell			
Driver's License No.		State		Issue Date		Exp. Date	
If you moved during 2020, enter your previous address.				Date of move			
Marital status at 12/31/20: <input checked="" type="radio"/> Single <input type="radio"/> Married <input type="radio"/> Separated <input type="radio"/> Widow(er) <input type="radio"/> Registered Domestic Partnership (RDP) <input type="radio"/> Unsure							
Were you divorced or separated during the year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>				Were there any deaths in the family? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>			
Individuals who are in registered domestic partnerships (RDPs) and civil unions are not considered married for federal tax purposes.							
Have you received any notice from the IRS or state revenue department within the past year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Names of dependent children		Social Security #	IP PIN	Date of birth	Months lived in home in 2020	Relationship to taxpayer	College student?
Child's full name <u>Leila Flanagan</u>		<u>009-92-3653</u>		<u>06-04-09</u>	<u>12</u>	<u>daughter</u>	<u>NO</u>
Did any of the children have unearned income above \$1,100 for the year? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Do any of the children have a disability? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Is it anticipated that a different taxpayer will seek to claim a child listed above as their dependent for tax year 2020? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Other dependents or people who lived with you							
Name	Social Security #	IP PIN	Date of birth	Months lived in home in 2020	Relationship	Income	
Bank information: Use for <input type="checkbox"/> Direct deposit of refund <input type="checkbox"/> Direct debit of balance due <input type="checkbox"/> Name of bank							
Checking	Savings	Routing transit number <u>211672531</u>	Account number <u>454572009396</u>				

Ask your tax preparer for information about depositing a refund into an IRA account or splitting the deposit into more than one account.

Questions — All Taxpayers

(Provide related statements or other documentation.)

"You" refers to both taxpayer and spouse—enter "?" if unsure about a question.

LIFESTYLE & TAXES	Yes <input checked="" type="radio"/> No <input type="radio"/>	Are either you or your spouse legally blind?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you pay or receive alimony in 2020? Paid Received \$	Recipient's SSN	Date of divorce or separation
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you purchase health insurance through a public exchange?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Will there be any significant changes in income or deductions next year, such as retirement?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Have you paid alternative minimum tax (AMT) in previous years?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you pay anyone for domestic services in your home?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you purchase a new energy-efficient car, truck, or van?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Are you involved in bankruptcy, foreclosure, repossession, or had any debt (including credit cards) cancelled?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Are you a member of the military?	State of residency	
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Were you a citizen of or lived in a foreign country?	Foreign country	
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Do you own or have financial interest in a foreign bank or financial account? Balance exceeds \$50,000 Yes No		
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you receive an economic impact payment? If so, provide the amount.		
Yes <input checked="" type="radio"/> No <input type="radio"/>	Would you like to allow your tax preparer or another person to discuss your return with the IRS? Designee's name Phone number PIN (any five digits)			
CHILDREN & EDUCATION	Yes <input checked="" type="radio"/> No <input type="radio"/>	Were any children born or adopted in 2020? (Provide statement for other expenses.)		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Were any children attending college? Year in college	Paid by you: Tuition \$	Student loan interest \$ Books \$
			Paid by student: Tuition \$	Student loan interest \$ Books \$
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you pay any tuition for a private school for a dependent or take classes yourself? Student Amount paid \$ Name and address of school		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you pay for child or dependent care so you could work or go to school? (add statement if needed) Name of provider EIN or SSN Address Amount paid \$		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Do you have any children who have unearned income of \$1,100 or more?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you make any contributions to a 529 plan in 2020?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you, or will you, contribute any money to an IRA for 2020? Traditional IRA Roth IRA		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you roll over any amounts from a retirement account in 2020?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you sell or transfer any stock or sell rental or investment property?		
INVESTMENTS	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you receive any income from an installment sale?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you have any investments become worthless or were you a victim of investment theft in 2020?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Were you granted, or did you exercise, any employee stock options during 2020?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you receive, sell, send, exchange, or otherwise acquire any financial interest in any virtual currency?		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you, or do you plan to, contribute money before April 15, 2021 to a HSA for 2020? If yes, provide details.		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you pay any interest on a loan for a boat or RV that has living quarters? If yes, provide details.		
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you pay sales taxes on a major purchase in 2020, such as a vehicle, boat, or home? BMW X5 2018 Model year		
DEDUCTIONS	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you make any charitable contributions in 2020? If yes, provide details. Small donations		
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you work from a home office or use your car for business?		
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you receive income from a sharing/gig economy activity (e.g. Airbnb, Uber, etc.) Air bnb		
	<input checked="" type="radio"/> Yes <input type="radio"/> No	Do you own a business or an interest in a partnership, corporation, LLC, farming activities, or other venture?		
BUSINESS	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you purchase or sell a main home during the year? If yes, provide closing statement.		
	Yes <input type="radio"/> No <input checked="" type="radio"/>	If you sold a home, did you claim the First-Time Homebuyer Credit when it was purchased? If yes, provide details. N/A		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you refinance a mortgage or take a home equity loan? If yes, provide closing statement.		
	Yes <input checked="" type="radio"/> No <input type="radio"/>	Did you use any mortgage loan proceeds for purposes other than to buy, build, or substantially improve your home? N/A		
HOME	<input checked="" type="radio"/> Yes <input type="radio"/> No	Did you make any new energy-efficient improvements to your home? If yes, provide details.		
	State information Full-year resident Part-year resident Nonresident School district Stowe			
States of residence during 2020 and dates				Do you rent or own your home? Rent <input type="radio"/> Own <input checked="" type="radio"/>

Income Worksheet

attached info 1099 NEC

Provide to your preparer all Forms W-2, 1099-INT, 1099-DIV, 1099-R, 1099-MISC, and other income reporting statements. Do not list dollar amounts for the following forms. Your preparer will report the appropriate amounts.

Indicate "T" for taxpayer, "S" for spouse, "J" for joint

Provide additional statements if more room is needed

Forms W-2 — Wage and Tax Statement

T/S	Employer name	T/S	Employer name
	1)		4)
	2)		5)
	3)		6)

Forms 1099-INT — Interest Income

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-DIV — Dividends and Distributions

T/S/J	Name of issuer	T/S/J	Name of issuer
	1)		4)
	2)		5)
	3)		6)

Forms 1099-R — Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, Etc.

T/S	Name of issuer	T/S	Name of issuer
	1)		4)
	2)		5)
	3)		6)

If the distribution is before age 59½, give a reason to determine if an exception to penalty applies.

Tax-Exempt Interest (such as municipal bonds — include statement)

Payer	\$	Payer	\$
-------	----	-------	----

Other Income

attached

State tax refund	\$	Other	\$
Unemployment compensation	\$		\$
Social Security (taxpayer) — provide SSA-1099 or RRB-1099	\$ N/A		\$
Social Security (spouse) — provide SSA-1099 or RRB-1099	\$ N/A		\$
Unreported tips	\$ N/A		\$
Business income (see Sole Proprietorship Tax Organizer)		Stock sales	See "Sales and Exchanges Worksheet" below.
Rental income (see Rental Property Tax Organizer)		Sale of other property	

Sales and Exchanges Worksheet

Provide information about sales of stock, real estate, or other property, along with Forms 1099-B, 1099-S, or other supporting statements.

Description of property	Purchase date	Cost/basis	Sale date	Sale price
n/a		\$		\$
		\$		\$
		\$		\$

Notes:

- When stock is sold, you will usually receive Form 1099-B, *Proceeds From Broker and Barter Exchange Transactions*, reporting the proceeds from the sale. However, your statement will not always provide the cost/basis information necessary to compute gain or loss. If the statement does not contain the cost/basis information, you must provide it. You may need to contact your broker for questions about cost/basis and purchase dates of your stock accounts.
- Often, "transfers" of stock or mutual funds within a brokerage account are actually sales of one type of stock and purchase of another. Even if you did not receive any cash from the transaction, you may have taxable gain or loss.
- If your stock dividends are automatically reinvested, the dividends will be taxable even though you did not receive any cash. The transaction is treated as if you had received cash and purchased additional stock. When the stock is sold, the amount reinvested over the years is taken into account. You may need to contact your broker for questions about the amount of reinvested dividends.
- If you sold property other than stock, your taxable gain or loss will be determined by your cost/basis. The cost/basis is usually the original purchase price plus improvements (the cost of repairs and maintenance are not taken into account for cost/basis).

Itemized Deductions Worksheet

Deductions must exceed \$12,400 Single, \$24,800 MFJ, \$18,650 HOH, or \$12,400 MFS to be a tax benefit.

Medical Expenses. Must exceed 7.5% of income to be a benefit—include cost for dependents—do not include any expenses that were reimbursed by insurance.

Dentists	\$	Hospitals	\$
Doctors	\$	Insurance	\$
Equipment	\$	Prescriptions	\$
Eyeglasses	\$	Other	\$

Medical miles: _____ @ 17¢

Taxes Paid. Do not include taxes paid for full or partial business or rental-use property, including business use of the home.

State withholding	Reported on W-2
State estimated taxes—paid in 2020	\$
Real estate tax—residence	\$
Real estate tax—other	\$
Personal property taxes	\$
Property tax refund—received in 2020	\$ ()
Foreign tax paid	\$
Other	\$
Other	\$
Other	\$
Balance paid in 2020 from prior year state returns (do not include interest or penalties)	\$

Did you keep receipts for sales tax paid during 2020? Yes No
 Did you purchase a car, plane, boat, or home in 2020? Yes No
 Sales tax paid \$2099 Purchase paid \$44,597 Date 12/29/20

Interest Paid. Do not include interest paid for full or partial business or rental-use property, including business use of the home. Provide all Forms 1098 or lender information and ID numbers.

Main home	\$	Equity loan	\$
Second home	\$	Equity loan	\$
Points	\$	Investment interest	\$

Did you pay a mortgage insurance premium when you purchased your home? Amount \$ Date

Charitable Contributions. If over \$500 in noncash charitable contributions, provide details of contributions. Rules require that the taxpayer retain documentation for all contributions.

Cash \$
 Noncash contributions (FMV). Clothing or household items must be in good used condition or better. \$ 500

Did you transfer funds from an IRA directly to a charity? Yes No \$

Charitable mileage

Casualty and Theft Losses

If you suffered any sudden, unexpected damage or loss of property, or a theft in a federally-declared disaster area, provide details to your tax preparer. Yes No

Miscellaneous Itemized Deductions. Miscellaneous itemized deductions subject to the 2% AGI limitation are no longer deductible on the federal return. However, these expenses may still be deductible on your state return. For use of home, auto mileage, or other job-related expenses, provide information on a separate sheet. Were any expenses reimbursed by your employer? Yes No

Dues	\$	Subscriptions	\$
Investment expenses	\$	Supplies	\$
Job education	\$	Tax prep fees	\$
Job seeking	\$	Tools	\$
Legal fees	\$	Uniforms	\$
Licenses	\$	Union dues	\$
Safety equipment	\$	Other	\$

Other Deductions. The following deductions are not subject to a 2% of income limit.

Gambling losses	\$	Federal estate tax on IRD	\$
Impairment-related expenses	\$	Loss from box 2, K-1, Form 1065B	\$

Other Deductions or Questions

2019 carry over for renovation on Airbnb property.
 own labor on rental. what rate than to charge?

- Notes:**
- Gambling losses are deductible only up to the amount of gambling winnings reported. A log must be kept to verify losses.
 - Work clothing is not deductible if adaptable for every day wear. Exception for safety equipment, such as steel-toe boots.
 - Expenses to enable individuals, who are physically or mentally impaired, to work are generally deductible.

Adjustments Worksheet

Educator expenses. Classroom expenses of teachers, counselors, and principals. Maximum \$250 each.	\$ n/a
Health savings account deduction (HSA). Some contributions for 2020 may be made in 2021.	\$ n/a
Self-employed SEP, SIMPLE, and qualified plans. Some contributions for 2020 may be made in 2021.	\$ n/a
Self-employed health insurance deduction. Sole proprietors, partners, and 2% S corporation shareholders if not eligible for employer coverage.	\$ n/a
Penalty on early withdrawal of savings.	\$ n/a
IRA deduction. For traditional IRAs. Roth IRAs are not deductible. Some contributions for 2020 may be made in 2021.	\$ n/a
Student loan interest deduction. Paid for taxpayers and dependents. Income limits apply.	\$ none paid
Tuition and fees deduction. Qualified tuition and fees if not claiming education credits. Income limits apply.	\$ n/a
Moving expenses. Available only to members of the Armed Forces (or their spouses or dependents) on active duty that move pursuant to a military order and incident to a permanent change of station.	\$ n/a Ask preparer
Business expenses of reservists, performing artists, and fee-based government officials.	Ask preparer
Charitable contributions. For taxpayers who take the standard deduction. Up to \$300 per return.	\$

Estimated Tax Payments — Tax Year 2020

unsure, I think I paid for

Installment	Date paid	Federal	Date paid	State
First		\$		2021
Second		\$		not
Third		\$		2020
Fourth		\$		10,000+/-
Amount applied from 2019 overpayment?		\$		
Total		\$		

Tax Preparation Checklist

Please provide the following documentation:

- ☐ All Forms W-2 (wages), 1099-INT (interest), 1099-DIV (dividends), 1099-B (proceeds from broker or barter transactions), 1099-R (pensions and IRA distributions), Schedules K-1 from partnerships, S corporations, estates and trusts, and other income reporting statements, including all copies provided from the payer.
- ☐ Form 1095-A (for health insurance purchased through a public exchange), Form 1095-B (for health insurance purchased outside of a public exchange), or Form 1095-C (for employer-provided health insurance coverage).
- ☐ If you are a new client, provide copies of last year's tax returns.
- ☐ The completed Individual Income Tax Organizer. **Note:** If you choose not to fill out the organizer, you must at least answer the "Yes" or "No" questions under "Questions — All Taxpayers."
- ☐ Copy of the closing statement if you bought or sold real estate.
- ☐ Mileage figures for any automobile expenses claimed, including total mileage, commuting mileage, and business mileage.
- ☐ Detail of estimated tax payments made, if any.
- ☐ Income and deductions categorized on a separate sheet for business or rental activities.
- ☐ List of itemized deductions categorized on a separate sheet for medical, taxes, interest, charitable, and miscellaneous deductions.
- ☐ Copy of all acknowledgement letters received from charitable organizations for contributions made in 2020.

Tax Return Preparation

We will prepare your tax return based on information you provide. In the event your return is audited, you will be responsible for verifying the items reported. It is important that you review the return carefully before signing to make sure the information is correct. Unless otherwise stated, the services for preparation of your return do not include auditing, review, or any other verification or assurance.

Taxpayer Responsibilities

- You agree to provide us all income and deductible expense information. If you receive additional information after we begin working on your return, you will contact us immediately to ensure your completed tax returns contain all relevant information.
- You affirm that all expenses or other deduction amounts are accurate and that you have all required supporting written records. In some cases, we will ask to review your documentation.
- You must be able to provide written records of all items included on your return if audited by either the IRS or state tax authority. We can provide guidance concerning what evidence is acceptable.
- You must review the return carefully before signing to make sure the information is correct.
- Fees must be paid before your tax return is delivered to you or filed for you. If you terminate this engagement before completion, you agree to pay a fee for work completed. A retainer is required for preparation of late returns.
- You should keep a copy of your tax return and any related tax documents. You may be assessed a fee if you request a copy in the future.

Signatures. By signing below, you acknowledge that you have read, understand, and accept your obligations and responsibilities. For a joint return, both taxpayers must sign.

Nancy duMont

Taxpayer

Spouse

8/20/21

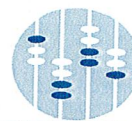
Date

Privacy Policy

The nature of our work requires us to collect certain nonpublic information. We collect financial and personal information from applications, worksheets, reporting statements, and other forms, as well as interviews and conversations with our clients and affiliates. We may also review banking and credit card information about our clients in the performance of receipt of payment. Under our policy, all information we obtain about you will be provided by you or obtained with your permission.

Our firm has procedures and policies in place to protect your confidential information. We restrict access to your confidential information to those within our firm who need to know in order to provide you with services. We will not disclose your personal information to a third party without your permission, except where required by law. We maintain physical, electronic, and procedural safeguards in compliance with federal regulations that protect your personal information from unauthorized access.

Sole Proprietorship Tax Organizer and LLC



SHELTRA
TAX & ACCOUNTING, LLC

Sole Proprietor General Information

Name of sole proprietor Nancy duMont

Business name (if different) Snow Worries, LLC EIN (if applicable) _____

Business address (if different from home address) _____

Principal business activity Property management Date business started 2008 Date business closed _____

Principal product or service same

☒ Yes ☐ No Was the primary purpose of the business activity to realize a profit?

☒ Yes ☐ No Did you materially participate in the operation of this business?

☒ Yes ☐ No Has the business reported any losses in prior years?

Accounting method: Cash Accrual Other (specify) _____

☒ Yes ☐ No Does the business file under a calendar year? (If no, list the fiscal year.) _____

Sole Proprietor Specific Questions

☒ Yes ☐ No Did you pay any family members for services?

☒ Yes ☐ No Did you make any payments of \$600 or more to subcontractors, attorneys, accountants, directors, etc.?

☒ Yes ☐ No If Yes, did you issue Form 1099-NEC? List name and social security number (SSN) for each person to whom you paid \$600 or more.

Name Aimee Young SSN on record

Name _____ SSN with Diana's office

☒ Yes ☐ No Did you make, or do you plan to make, any contributions to a self-employed retirement plan?

Type of plan _____ Amount contributed \$ _____

☒ Yes ☐ No Did you pay for your own health/dental insurance? If Yes, provide amount of premiums paid during the year. \$ _____

☒ Yes ☐ No Did you have any employees?

☒ Yes ☐ No Did you have any bartering transactions in 2020?

Sole Proprietor Business Income - Only fill out if I do not have your QB File or Financial Statements - Provide all 1099s

Gross receipts or sales (if you received Forms 1099-NEC, list name of payer and amount separately from gross receipts or sales)

Form 1099-NEC	\$ _____	Form 1099-K	\$ _____
---------------	----------	-------------	----------

Total of all Forms 1099-NEC and 1099-K received \$ _____

Returns and allowances \$ _____

Other income (not included in gross receipts above) \$ (_____)

Form 1099-NEC. You may receive Form 1099-NEC (instead of Form W-2) if you are not classified as an employee. If you receive Form 1099-NEC, you are generally required to file Schedule C, Profit or Loss From Business, claim any expenses associated with the income received, and must pay self-employment (SE) tax on the income.

Sole Proprietor Cost of Goods Sold (for manufacturers, wholesalers, and businesses that make, buy, or sell goods)

COVID-19 Related - Required!

Inventory at the beginning of the year	\$ _____	<input checked="" type="radio"/> Yes <input type="radio"/> No Did you receive an Economic Injury Disaster Loan or Emergency Advance through the SBA?
Purchases	\$ _____	<input checked="" type="radio"/> Yes <input type="radio"/> No Did you delay payment of employer payroll taxes? <u>N/A</u>
Cost of labor	\$ _____	<input checked="" type="radio"/> Yes <input type="radio"/> No Were you eligible to receive a tax credit for sick leave due to COVID-19?
Materials and supplies	\$ _____	<input checked="" type="radio"/> Yes <input type="radio"/> No Were you eligible to receive a tax credit for paid family leave due to COVID-19?
Inventory at the end of the year	\$ _____	<input checked="" type="radio"/> Yes <input type="radio"/> No Did you receive a payroll tax credit for a business suspension or slowdown?

Sole Proprietor Business Expenses

Advertising	\$ _____	Interest - mortgage	\$ _____	Repairs and maintenance	\$ _____
Bad debts	\$ _____	Interest - other	\$ _____	Supplies (not included in inventory cost)	\$ _____
Bank charges	\$ _____	Internet service	\$ _____	Taxes - payroll ¹	\$ _____
Business licenses	\$ _____	Legal and professional services	\$ _____	Taxes - property	\$ _____
Commissions and fees	\$ _____	Management fees	\$ _____	Taxes - sales	\$ _____
Contract labor ¹	\$ _____	Meals - business	\$ _____	Taxes - state	\$ _____
Employee benefit programs	\$ _____	Office supplies	\$ _____	Telephone	\$ _____
Employee health care plans	\$ _____	Start-up costs (first year of business)	\$ _____	Utilities	\$ _____
Entertainment ²	\$ _____	Pension and profit sharing plans	\$ _____	Wages ¹	\$ _____
Gifts	\$ _____	Rent or lease - car, machinery, equipment	\$ _____	Other	\$ _____
Insurance (other than health insurance)	\$ _____	Rent or lease - other business property	\$ _____		\$ _____

¹ Provide copies of Form W-3, Form 940, Form 941, Form 1096, Form 1099-NEC, Form 1099-MISC, and any state tax forms filed.

² Entertainment is no longer deductible for taxes.

Other Business Expenses – List out type and expense amount

	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Car Expenses (use a separate form for each vehicle)

Make/Model	BMW X5		Date car placed in service		12/29/2018 20	
<input checked="" type="radio"/> Yes <input type="radio"/> No	Car available for personal use during off-duty hours?					
<input checked="" type="radio"/> Yes <input type="radio"/> No	Do you (or your spouse) have any other cars for personal use?		Did you trade in your car this year? Yes <input type="radio"/> No <input checked="" type="radio"/>			
<input checked="" type="radio"/> Yes <input type="radio"/> No	Do you have evidence?		Cost of trade-in		Trade-in value	
<input checked="" type="radio"/> Yes <input type="radio"/> No	Is your evidence written?		\$		\$	
Mileage			Actual Expenses			
Beginning of year odometer			Gas/oil		\$	
End of year odometer			Insurance		\$	
Business mileage			Parking fees/tolls		\$	
Commuting mileage			Registration/fees		\$	
Other mileage			Repairs		\$	

Generally, you can use either the standard mileage rate or actual expenses to figure the deductible costs of operating your car for business purposes. However, to use the standard mileage rate, it must be used in the first year the car is available for business. In later years, you can then choose between either the standard mileage rate method or actual expenses.

Travel Expenses

• **Meals.** You can deduct the cost of meals while traveling away from home on business. You can use the actual cost of your meals or the standard meal allowance per diem, which can vary by location.

• **Travel/Lodging.** You can deduct the ordinary and necessary expenses of traveling away from your home for business purposes. Included expenses are transportation, airfare, taxi, lodging, etc.

City visited (for per diem)	# of days in city	City visited (for per diem)	# of days in city

Travel expenses

Airfare	\$	Other travel expenses (describe below)	
Bus, train, taxi	\$		\$
Entertainment	\$		\$
Lodging	\$		\$
Parking and tolls	\$		\$
Meals (actual receipts)	\$		\$

Equipment Purchases – Enter the following information for depreciable assets purchased that have a useful life greater than one year

Asset	Date purchased	Cost	Date placed in service	New or used?
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		
		\$		

Depreciation. Depreciation is the annual deduction that allows you to recover the cost or other basis of your business property over a certain number of years. Depreciation starts when you first use the property in your business. It ends when you either take the property out of service, deduct all your depreciable cost or basis, or no longer use the property in your business. The IRS has outlined a useful life (a set number of years) for most assets.

Equipment Sold or Disposed of During Year

Asset	Date out of service	Date sold	Selling price/FMV	Trade-in?
			\$	
			\$	
			\$	
			\$	

Disposition of Property. A disposition of property occurs when you sell property for cash or other property, you exchange property for other property, you transfer property to satisfy a debt, you abandon property, your bank forecloses or repossesses your property, or your property is damaged, destroyed, or stolen and you receive property or money in payment.

Business Use of the Home

Area of home must be exclusively used for business except for storage or day care. *Note:* Managing rental activities or investments does not qualify for business use of the home.

All Taxpayers

A) Business use area (square footage)

B) Total area of home (square footage)

For Day Care Only

1) Hours used for day care

2) Total hours in year

8,760 hrs.

Enter below only the expenses paid during the period the home was used for business.

Direct expenses benefit only the business use portion of the home. This includes painting or repairs exclusively for the business area.

Indirect expenses are for keeping up and running the entire home, such as mortgage interest and property taxes.

If you bought or sold your home during 2019, copy this worksheet and fill out one for each home.

	Direct	Indirect		Direct	Indirect
Mortgage interest	\$	\$	Repairs and maintenance	\$	\$
Property taxes	\$	\$	Utilities	\$	\$
Insurance	\$	\$	Other	\$	\$
Rent	\$	\$	Other	\$	\$

Depreciation of the Home

Lower of cost or fair market value of home

Value of land

Improvements?

Casualty losses in 2020?

Yes No

Yes No

1) Exclusive Use Test—Business Use of Home

The exclusive use test is met if an area of the home is used only for business. The area can be a room or other separately identifiable space. The space does not need to be marked off by a permanent partition. This test is not met if you use the area both for business and for personal purposes, such as a den used for business during the day and TV viewing during the evening.

The exclusive use test is not required for:

- An area used on a regular basis for storage of inventory or product samples.
- A home used as a day care facility.

Storage of inventory or product samples—exception to exclusive use test. If you use part of a home for business to store inventory or product samples you are not required to meet the exclusive use test. However, you must meet all the following tests.

- You are in the business of selling products at wholesale or retail.
- The inventory or product samples are kept in the home for use in the business.
- Your home is the only fixed location of the business.
- The storage space is used on a regular basis.
- The storage space is a separately identifiable space suitable for storage.

2) Regular Use Test—Business Use of Home

The regular use test means you must use a specific area of the home for business on a regular basis. Incidental or occasional business use is not regular use. All facts and circumstances are considered in determining whether the business use is regular.

3) Trade or Business Use Test—Business Use of Home

To satisfy the trade or business use test, the portion of the home used for business must be used in connection with a trade or business. If the business use is for a profit-seeking activity that is not a trade or business, the deduction is not allowed.

4) Principal Place of Business Test—Business Use of Home

A trade or business can have more than one location. To qualify for a business use of home deduction, the home must be the principal place of business for that trade or business. To make this determination, the following are considered.

- The relative importance of the activities performed at each place where business is conducted, and
- The amount of time spent at each place where business is conducted.

A home office qualifies under this test if:

- The home office is used exclusively and regularly for administrative or management activities of the trade or business.
- There is no other fixed location where substantial administrative or management activities are conducted.

Self-Employment (SE) Tax

• SE tax is a Social Security and Medicare tax primarily for individuals who are self-employed. It is similar to the Social Security and Medicare tax withheld from the pay of most wage earners. Your payments of SE tax contribute to your coverage under the Social Security system. Social Security coverage provides you with retirement benefits, disability benefits, survivor benefits, and hospital insurance (Medicare) benefits.

- You must pay SE tax if your net earnings from self-employment were \$400 or more, or you had church employee income of \$108.28 or more. The SE tax rules apply no matter how old you are and even if you are already receiving Social Security or Medicare benefits.
- The SE tax rate on net earnings is 15.3% (12.4% for Social Security plus 2.9% for Medicare). Only the first \$142,900 (2020) of combined wages, tips, and net earnings is subject to the 12.4% Social Security part of SE tax.



State of Vermont
Department of Taxes
133 State Street
Montpelier, VT 05633-1401

Agency of Administration

00264

Jul 1, 2020

NANCY J DUMONT
1241 TABER HILL RD
STOWE VT 05672-4440

Letter ID: L1153843456
Account ID: HSD-10220471
Tax: Homestead
Period: Dec-31-2020

Re: 2020 Property Tax Credit - Credit to be sent to your town

Dear NANCY J. DUMONT:

We are sending this letter to notify you that we have calculated a credit to be applied to your 2020/2021 property tax bill based upon information from your 2020 Form HS-122, Homestead Declaration and Property Tax Credit Claim. Please check the information shown below carefully. If any of the information is incorrect, please contact your tax preparer or the Vermont Department of Taxes immediately. Your Housesite Value, Ownership Interest, and Property Tax amounts cannot be changed after 10/15/2020.

SPAN	621-195-10951
Housesite Value (from 2019/2020 property tax bill)	\$190,100.00
Housesite Education Tax	\$2,933.00
Housesite Municipal Tax	\$818.00
2019 Household Income	\$32,814.00
Ownership Interest	100.00%
 CREDIT PAYMENT AMOUNT	 \$2,277.00
LESS: Offset for outstanding debt (The credit can be taken to pay an outstanding debt to the Department or to other state agencies.)	\$0.00
PLUS: Income Tax Refund Amount Designated for Property Tax	\$0.00
PLUS: 1% of Income Tax Refund Incentive	\$0.00

TOTAL CREDIT SENT TO TOWN

Credit for Education Tax \$2,277.00 + Credit for Municipal Tax \$0.00 = \$2,277.00



PAYABLE TO:

MAIL TO:

Town of Stowe

Town of Stowe

PO Box 730

Stowe, VT 05672

802-253-6133

REVISED
8.1.2019**TAX BILL**

PARCEL ID	BILL DATE	TAX YEAR
10024.	08/01/2019	19-20

Description: 3 AC & DWL

Location: 1241 TABER HILL RD

OWNER DUMONT NANCY J
1241 TABER HILL RD
STOWE VT 05672

HOUSESITE TAX INFORMATION

SPAN # 621-195-10951 SCL CODE: 195
TOTAL PARCEL ACRES 3.00
HOUSESITE VALUE 190,100
HOUSESITE EDUCATION TAX 2,933.24
HOUSESITE MUNICIPAL TAX 817.81
HOUSESITE TOTAL TAX 3,751.05
FOR INCOME TAX PURPOSES

ASSESSED VALUE		HOMESTEAD	
REAL	200,900	200,900	
TOTAL TAXABLE VALUE	200,900	200,900	
GRAND LIST VALUES	2,009.00	2,009.00	

MUNICIPAL TAXES				EDUCATION TAXES				
TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES	TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES	
Town	0.4253	x2,009.00=	854.43	HOMESTEAD EDUCATION	1.5430	x2,009.00=	3,099.89	
Voter Apvd Exemption	0.0049	x2,009.00=	9.84					
<div>Revised Bill</div>				See reverse side for education tax rate calculation information.				
				Payments		TOTAL EDUCATION TAX		3,099.89
				1	08/15/2019	EDUCATION STATE PAYMENT		2,824.00
					123.54	EDUCATION NET TAX DUE		275.89
				2	11/15/2019	TAX SUMMARY		
					123.54	Municipal + Education		
				3	02/18/2020	TOTAL TAX		3,964.16
					123.54	TOTAL STATE PAYMENT		3,470.00
				4	05/15/2020	TOTAL NET TAX DUE		494.16
							123.54	
TOTAL MUNICIPAL TAX			864.27					
MUNICIPAL STATE PAYMENT			646.00					
MUNICIPAL NET TAX DUE			218.27					

DETACH THE STUBS BELOW AND RETURN WITH YOUR PAYMENT

Town of Stowe
TAX YEAR 19-20

1ST PAYMENT DUE	
08/15/2019	
OWNER NAME	
DUMONT NANCY J	
PARCEL ID	
10024-	
AMOUNT DUE	PD 123.54
AMOUNT PAID	Revised Bill

* 991.04 (7/31/19)
- 123.54
867.50 CR

Town of Stowe
TAX YEAR 19-20

2ND PAYMENT DUE	
11/15/2019	
OWNER NAME	
DUMONT NANCY J	
PARCEL ID	
10024-	
AMOUNT DUE	PD 123.54
AMOUNT PAID	Revised Bill

867.50 CR
- 123.54
743.96 CR

Town of Stowe
TAX YEAR 19-20

3RD PAYMENT DUE	
02/18/2020	
OWNER NAME	
DUMONT NANCY J	
PARCEL ID	
10024-	
AMOUNT DUE	PD 123.54
AMOUNT PAID	Revised Bill

743.96 CR
- 123.54
620.42 CR

Town of Stowe
TAX YEAR 19-20

4TH PAYMENT DUE	
05/15/2020	
OWNER NAME	
DUMONT NANCY J	
PARCEL ID	
10024-	
AMOUNT DUE	PD 123.54
AMOUNT PAID	Revised Bill

620.42 CR
- 123.54
\$ 496.88 CR

Payable by 4:30 PM of due date to:

TOWN OF STOWE

Mail to:

P.O. Box 730

Stowe, VT 05672-0730

67 Main Street, P O Box 730
Stowe, Vermont 05672-0730
802.253.6133

RECEIVE. PLEASE SEND IT TO
NEW OWNER IF PROPERTY IS SOLD.

PARCEL ID	BILL DATE	TAX YEAR
10024.	07/10/2020	20-21

Description: 3 AC & DWL

Location: 1241 TABER HILL RD

OWNER
DUMONT NANCY J
1241 TABER HILL RD
STOWE VT 05672

Taxes on real property are payable in four (4) equal installments, due as shown below. Taxes not paid when due are delinquent and payable to the collector of delinquent taxes. Interest at two (2) percent on any tax not paid on or before the due date will be charged per month or fraction thereof.

HOUSESITE TAX INFORMATION	
SPAN # 621-195-10951	SCL CODE: 195
TOTAL PARCEL ACRES	3.00
HOUSESITE VALUE	190,100
HOUSESITE EDUCATION TAX	3,102.43
HOUSESITE MUNICIPAL TAX	836.82
HOUSESITE TOTAL TAX	3,939.25
RETAIN FOR INCOME TAX PURPOSES	

ASSESSED VALUE	HOMESTEAD	NON HOMESTEAD
REAL 200,900	200,900	
TOTAL TAXABLE VALUE 200,900	200,900	
GRAND LIST VALUES 2,009.00	2,009.00	

MUNICIPAL TAXES				EDUCATION TAXES			
TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES	TAX RATE NAME	TAX RATE	x GRAND LIST =	TAXES
Town	0.4350	x2,009.00=	873.90	HOMESTEAD EDUCATION	1.6320	x2,009.00=	3,278.69
Farmers Contracts	0.0052	x2,009.00=	10.45				
<div style="border: 2px solid black; padding: 10px; text-align: center;"> POSTMARKS NOT ACCEPTED </div>				See reverse side for education tax rate calculation information.			
				Payments	TOTAL EDUCATION TAX		3,278.69
				1 08/17/2020 471.51	EDUCATION STATE PAYMENT		2,277.00
				2 11/16/2020 471.51	EDUCATION NET TAX DUE		1,001.69
				3 02/15/2021 471.51	TAX SUMMARY		
				4 05/17/2021 471.51	Municipal + Education		
TOTAL MUNICIPAL TAX			884.35	TOTAL TAX			4,163.04
MUNICIPAL STATE PAYMENT			0.00	TOTAL STATE PAYMENT			2,277.00
MUNICIPAL NET TAX DUE			884.35	TOTAL NET TAX DUE			1,886.04

EASTERN SYSTEMS 800.223.0101

DETACH THE STUBS BELOW AND RETURN WITH YOUR PAYMENT

1 TOWN OF STOWE
TAX YEAR 20-21

1ST PAYMENT DUE

08/17/2020

OWNER NAME

DUMONT NANCY J

PARCEL ID

10024-

AMOUNT DUE 471.51

AMOUNT PAID



120009841

2 TOWN OF STOWE
TAX YEAR 20-21

2ND PAYMENT DUE

11/16/2020

OWNER NAME

DUMONT NANCY J

PARCEL ID

10024-

AMOUNT DUE 471.51

AMOUNT PAID



120009842

3 TOWN OF STOWE
TAX YEAR 20-21

3RD PAYMENT DUE

02/15/2021

OWNER NAME

DUMONT NANCY J

PARCEL ID

10024-

AMOUNT DUE 471.51

AMOUNT PAID



120009843

4 TOWN OF STOWE
TAX YEAR 20-21

4TH PAYMENT DUE

05/17/2021

OWNER NAME

DUMONT NANCY J

PARCEL ID

10024-

AMOUNT DUE 471.51

AMOUNT PAID



120009844

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

Wells Fargo Bank N.A.
Return Mail Operations
PO Box 14411
Des Moines IA 50306-3411

01/05/21

We accept telecommunications relay service calls.

Phone #: 1-866-234-8271

Fax #: 1-866-278-1179

☐ CORRECTED (if checked)

PAYER'S/BORROWER'S name, street address, city, state and ZIP code
0067194 01 AV 0.389 **AUTO T8 2 0453 05672-444041 -C01-P67261-I



EDWARD F FLANAGAN
1241 TABER HILL RD
STOWE, VT 05672-4440



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

OMB No.
1545-1380
2020

Form
1098

MORTGAGE INTEREST STATEMENT

**Copy B
For Payer**

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 the mortgage interest or for these points, reported in boxes 1 and 6; or because you did not report the refund of interest (box 4); or because you claimed a non-deductible item.

RECIPIENT'S/LENDER'S TIN
94-1347393

PAYER'S/BORROWER'S TIN
XXX-XX-8047

1 Mortgage Interest received from payer(s)/borrower(s)* \$1,584.19

2 Outstanding mortgage principal (See instructions) \$155,381.61
3 Mortgage origination date 01/04/2008

4 Refund of overpaid interest \$0.00
5 Mortgage insurance premiums \$0.00

6 Points paid on purchase of principal residence \$0.00

7 The address of the property securing the mortgage will be entered in box 8 and may be the same as PAYER'S/BORROWER'S address.
See box 8 below.

8 Address or description of property securing mortgage (see instructions)
1241 TABER HILL ROAD
STOWE, VT 05672

9 Number of mortgaged properties	10 Real estate taxes \$943.02	11 Mortgage acquisition date
----------------------------------	-------------------------------	------------------------------

Mortgage information as of 12/31/2020 (See instructions)

\$154,599.76 Ending principal balance

\$1,224.20 Total current payment

\$41.18 Escrow portion of payment

Account number

0207114729

Form 1098 SEE BACK SIDE FOR IMPORTANT INFORMATION (Keep for your records.) www.irs.gov/Form1098 Department of the Treasury - Internal Revenue Service

Please consult a Tax Advisor about the deductibility of any payments made by you or others.

Box 2. Shows the outstanding principal on the mortgage as of January 1, 2020. If the mortgage originated in 2020, shows the mortgage principal as of the date of origination. If the recipient/lender acquired the loan in 2020, shows the mortgage principal as of the date of acquisition.

2020 INTEREST DETAIL

TOTAL INTEREST APPLIED 2020

2020 MORTGAGE INTEREST RECEIVED FROM PAYER/BORROWER(S)

\$1,584.19

\$1,584.19

If you have questions about your loan, you can use the number listed at the top of this statement. By selecting one of the options listed, you can receive information regarding:

- Taxes paid year-to-date
- Interest paid year-to-date
- The amount & date of your last payment
- Other valuable information

We issue tax documents to the primary account owner.

Wells Fargo Home Mortgage, a division of Wells Fargo Bank, N.A., believes Customers come first. You can always count on us to provide the excellent service you've come to expect.

NNNNNNNNNN

0453-01-00-0067194-0001-0070899

003694

☒ CORRECTED (if checked)**FOR CALENDAR YEAR 2020**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation \$ 400.00	OMB No. 1545-0120	Certain Government Payments Copy B For Recipient
VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		2 State or local income tax refunds, credits, or offsets \$	2020	
PAYER'S TIN 03-0272593		Form 1099-G		
RECIPIENT'S TIN ***-**-0942		3 Box 2 amount is for tax year	4 Federal income tax withheld \$.00	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, Street Address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code NANCY J DUMONT 1241 Taber Hill Rd Stowe VT 05672		5 RTAA payments \$	6 Taxable grants \$	
Account number (see instructions) 004 VSTS		7 Agriculture payments \$	8 Check if box 2 is trade or business income <input type="checkbox"/>	
		9 Market gain \$		
		10a State VT 10b State identification no. WHT 10078067	11 State income tax withheld \$.00	

Form 1099-G (keep for your records)

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

1099G (01/21)

☒ CORRECTED (if checked)**FOR CALENDAR YEAR 2020**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation \$ 400.00	OMB No. 1545-0120	Certain Government Payments Copy 2 To be filed with recipient's state income tax return, when required
VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		2 State or local income tax refunds, credits, or offsets \$	2020	
PAYER'S TIN 03-0272593		Form 1099-G		
RECIPIENT'S TIN ***-**-0942		3 Box 2 amount is for tax year	4 Federal income tax withheld \$.00	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, Street Address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code NANCY J DUMONT 1241 Taber Hill Rd Stowe VT 05672		5 RTAA payments \$	6 Taxable grants \$	
Account number (see instructions) 004 VSTS		7 Agriculture payments \$	8 Check if box 2 is trade or business income <input type="checkbox"/>	
		9 Market gain \$		
		10a State VT 10b State identification no. WHT10078067	11 State income tax withheld \$.00	

Form 1099-G (keep for your records)

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

1099G (01/21)

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

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

Box 1. Shows the total unemployment compensation paid to you this year. Combine the box 1 amounts from all Forms 1099-G and report the total as income on the unemployment compensation line of your tax return. Except as explained below, this is your taxable amount. If you are married filing jointly, each spouse must figure his or her taxable amount separately. If you expect to receive these benefits in the future, you can ask the payer to withhold federal income tax from each payment. Or you can make estimated tax payments. For details, see 1040-ES. If you made contributions to a governmental unemployment compensation program or to a governmental paid family leave program and received a payment from that program, the payer must issue a separate Form 1099-G to report this amount to you. If you itemize deductions, you may deduct your contributions on Schedule A (Form 1040 or 1040-SR) as taxes paid. If you do not itemize, you only need to include in income the amount that is in excess of your contributions.

Box 2. Shows refunds, credits, or offsets of state or local income tax you received. It may be taxable to you if you deducted the state or local income tax paid on Schedule A (Form 1040 or 1040-SR). Even if you did not receive the amount shown, for example, because (a) it was credited to your state or local estimated tax, (b) it was offset against federal or state debts, (c) it was offset against other offsets, or (d) you made a charitable contribution from your refund, it is still taxable if it was deducted. If you received interest on this amount, you may receive Form 1099-INT for the interest. However, the payer may include interest of less than \$600 in the blank box next to box 9 on Form 1099-G. Regardless of whether the interest is reported to you, report it as interest income on your tax return. See your tax return instructions.

Box 3. Identifies the tax year for which the box 2 refunds, credits, or offsets shown were made. If there is no entry in this box, the refund is for 2019 taxes.

Box 4. Shows backup withholding or withholding you requested on unemployment compensation, Commodity Credit Corporation (CCC) loans, or certain crop disaster payments. Generally, a payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9 for information on backup withholding. Include this amount on your income tax return as tax withheld.

Box 5. Shows reemployment trade adjustment assistance (RTAA) payments you received. Include on the "Other income" line of Schedule 1 (Form 1040 or 1040-SR).

Box 6. Shows taxable grants you received from a federal, state, or local government.

Box 7. Shows your taxable Department of Agriculture payments. If the payer shown is anyone other than the Department of Agriculture, it means the payer has received a payment, as a nominee, that is taxable to you. This may represent the entire agricultural subsidy payment received on your behalf by the nominee, or it may be your pro rata share of the original payment. See Pub. 225 and the Instructions for Schedule F (Form 1040 or 1040-SR) for information about where to report this income. Partnerships, see Form 8825 for how to report.

Box 8. If this box is checked, the amount in box 2 is attributable to an income tax that applies exclusively to income from a trade or business and is not a tax of general application. If taxable, report the amount in box 2 on Schedule C or F (Form 1040 or 1040-SR), as appropriate.

Box 9. Shows market gain on CCC loans whether repaid using cash or CCC certificates. See the Schedule F (Form 1040 or 1040-SR) instructions.

Boxes 10a-11. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-G and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099G.

013450

☒ CORRECTED (if checked)**FOR CALENDAR YEAR 2020**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		1 Unemployment compensation \$ 28,581.00	OMB No. 1545-0120	Certain Government Payments Copy B For Recipient
		2 State or local income tax refunds, credits, or offsets \$	2020	
PAYER'S TIN 03-0272593	RECIPIENT'S TIN ***-**-0942	3 Box 2 amount is for tax year	4 Federal income tax withheld \$ 2,849.00	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, Street Address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code Nancy J duMont 1241 Taber Hill Rd Stowe VT 05672		5 RTAA payments \$	6 Taxable grants \$	
Account number (see instructions) 002 PUA		7 Agriculture payments \$	8 Check if box 2 is trade or business income <input type="checkbox"/>	
		9 Market gain \$		
		10a State VT	10b State identification no. WHT 10078067	11 State income tax withheld \$ 666.00

Form 1099-G

(keep for your records)

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

1099G (01/21)

☒ CORRECTED (if checked)**FOR CALENDAR YEAR 2020**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		1 Unemployment compensation \$ 28,581.00	OMB No. 1545-0120	Certain Government Payments Copy 2 To be filed with recipient's state income tax return, when required
		2 State or local income tax refunds, credits, or offsets \$	2020	
PAYER'S TIN 03-0272593	RECIPIENT'S TIN ***-**-0942	3 Box 2 amount is for tax year	4 Federal income tax withheld \$ 2,849.00	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, Street Address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code Nancy J duMont 1241 Taber Hill Rd Stowe VT 05672		5 RTAA payments \$	6 Taxable grants \$	
Account number (see instructions) 002 PUA		7 Agriculture payments \$	8 Check if box 2 is trade or business income <input type="checkbox"/>	
		9 Market gain \$		
		10a State VT	10b State identification no. WHT 10078067	11 State income tax withheld \$ 666.00

Form 1099-G

(keep for your records)

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

1099G (01/21)

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

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

Box 1. Shows the total unemployment compensation paid to you this year. Combine the box 1 amounts from all Forms 1099-G and report the total as income on the unemployment compensation line of your tax return. Except as explained below, this is your taxable amount. If you are married filing jointly, each spouse must figure his or her taxable amount separately. If you expect to receive these benefits in the future, you can ask the payer to withhold federal income tax from each payment. Or you can make estimated tax payments. For details, see 1040-ES. If you made contributions to a governmental unemployment compensation program or to a governmental paid family leave program and received a payment from that program, the payer must issue a separate Form 1099-G to report this amount to you. If you itemize deductions, you may deduct your contributions on Schedule A (Form 1040 or 1040-SR) as taxes paid. If you do not itemize, you only need to include in income the amount that is in excess of your contributions.

Box 2. Shows refunds, credits, or offsets of state or local income tax you received. It may be taxable to you if you deducted the state or local income tax paid on Schedule A (Form 1040 or 1040-SR). Even if you did not receive the amount shown, for example, because (a) it was credited to your state or local estimated tax, (b) it was offset against federal or state debts, (c) it was offset against other offsets, or (d) you made a charitable contribution from your refund, it is still taxable if it was deducted. If you received interest on this amount, you may receive Form 1099-INT for the interest. However, the payer may include interest of less than \$600 in the blank box next to box 9 on Form 1099-G. Regardless of whether the interest is reported to you, report it as interest income on your tax return. See your tax return instructions.

Box 3. Identifies the tax year for which the box 2 refunds, credits, or offsets shown were made. If there is no entry in this box, the refund is for 2019 taxes.

Box 4. Shows backup withholding or withholding you requested on unemployment compensation, Commodity Credit Corporation (CCC) loans, or certain crop disaster payments. Generally, a payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9 for information on backup withholding. Include this amount on your income tax return as tax withheld.

Box 5. Shows reemployment trade adjustment assistance (RTAA) payments you received. Include on the "Other income" line of Schedule 1 (Form 1040 or 1040-SR).

Box 6. Shows taxable grants you received from a federal, state, or local government.

Box 7. Shows your taxable Department of Agriculture payments. If the payer shown is anyone other than the Department of Agriculture, it means the payer has received a payment, as a nominee, that is taxable to you. This may represent the entire agricultural subsidy payment received on your behalf by the nominee, or it may be your pro rata share of the original payment. See Pub. 225 and the Instructions for Schedule F (Form 1040 or 1040-SR) for information about where to report this income. Partnerships, see Form 8825 for how to report.

Box 8. If this box is checked, the amount in box 2 is attributable to an income tax that applies exclusively to income from a trade or business and is not a tax of general application. If taxable, report the amount in box 2 on Schedule C or F (Form 1040 or 1040-SR), as appropriate.

Box 9. Shows market gain on CCC loans whether repaid using cash or CCC certificates. See the Schedule F (Form 1040 or 1040-SR) instructions.

Boxes 10a-11. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-G and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099G.

☐ **CORRECTED (if checked)**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		1 Unemployment Compensation \$ 28581.00		OMB No. 1545-0120 2020 Form 1099-G		Certain Government Payments 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.
PAYER'S TIN 03-0272593		2 State or local income tax refunds, credits, or offsets \$		3 Box 2 amount is for tax year		
RECIPIENT'S TIN 030-64-0942		5 RTAA payments \$		6 Taxable grants \$		
RECIPIENT'S name, Street Address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code NANCY J DUMONT 1241 TABER HILL RD STOWE, VT 05672		7 Agriculture payments \$		8 Check if box 2 is trade or business income > <input type="checkbox"/>		
Account number (see instructions) 002 PUA		9 Market gain \$		10a State VT		
		10b State identification no WHT10078067		11 State income tax withheld \$ 666.00		
Form 1099-G (keep for your records)		Form 1099-G		www.irs.gov/form1099g		1099G (01/20)

☐ **CORRECTED (if checked)**

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. VERMONT DEPARTMENT OF LABOR 5 Green Mountain Drive, P.O. Box 488 Montpelier, VT 05601-0488		1 Unemployment Compensation \$ 28581.00		OMB No. 1545-0120 2020 Form 1099-G		Certain Government Payments Copy 2 To be filed with recipient's state income tax return, when required. 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.
PAYER'S TIN 03-0272593		2 State or local income tax refunds, credits, or offsets \$		3 Box 2 amount is for tax year		
RECIPIENT'S TIN 030-64-0942		5 RTAA payments \$		6 Taxable grants \$		
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Account number (see instructions) 002 PUA		9 Market gain \$		10a State VT		
		10b State identification no WHT10078067		11 State income tax withheld \$ 666.00		
Form 1099-G (keep for your records)		Form 1099-G		www.irs.gov/form1099g		1099G (01/20)

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS. **Account Number.** May show an account or other unique number the payer assigned to distinguish your account.

Box 1. Shows the total unemployment compensation paid to you this year. Combine the box 1 amounts from all Forms 1099-G and report the total as income on the unemployment compensation line of your tax return. Except as explained below, this is your taxable amount. If you are married filing jointly, each spouse must figure his or her taxable amount separately. If you expect to receive these benefits in the future, you can ask the payer to withhold federal income tax from each payment. Or you can make estimated tax payments. For details, see 1040-ES. If you made contributions to a governmental unemployment compensation program or to a governmental paid family leave program and received a payment from that program, the payer must issue a separate Form 1099-G to report this amount to you. If you itemize deductions, you may deduct your contributions on Schedule A (Form 1040 or 1040-SR) as taxes paid. If you do not itemize, you only need to include in income the amount that is in excess of your contributions.

Box 2. Shows refunds, credits, or offsets of state or local income tax you received. It may be taxable to you if you deducted the state or local income tax paid on Schedule A (Form 1040 or 1040-SR). Even if you did not receive the amount shown, for example, because (a) it was credited to your state or local estimated tax, (b) it was offset against federal or state debts, (c) it was offset against other offsets, or (d) you made a charitable contribution from your refund, it is still taxable if it was deducted. If you received interest on this amount, you may receive Form 1099-INT for the interest. However, the payer may include interest of less than \$600 in the blank box next to box 9 on Form 1099-G. Regardless of whether the interest is reported to you, report it as interest income on your tax return. See your tax return instructions.

Box 3. Identifies the tax year for which the box 2 refunds, credits, or offsets shown were made. If there is no entry in this box, the refund is for 2020 taxes.

Box 4. Shows backup withholding or withholding you requested on unemployment compensation, Commodity Credit Corporation (CCC) loans, or certain crop disaster payments. Generally, a payer must backup withhold on certain payments if you did not give your TIN to the payer. See Form W-9 for information on backup withholding. Include this amount on your income tax return as tax withheld.

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Box 9. Shows market gain on CCC loans whether repaid using cash or CCC certificates. See the Schedule F (Form 1040 or 1040-SR) instructions.

Boxes 10a—11. State income tax withheld reporting boxes.

Future developments. For the latest information about developments related to Form 1099-G and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099G.

P.O. Box 220
SHELBURNE, VT. 05482
Telephone (802) 985-8411
800-639-8033
www.theautomaster.com

VEHICLE BUYER'S ORDER

Date: 12/29/2020

Buyer Name and Address (Including County and Zip Code)	Co-Buyer Name and Address (Including County and Zip Code)	Seller Name and Address
NANCY J DUMONT 1241 TABER HILL RD STOWE VT 05672 LANOILLE Email: nancyjdumont@gmail.com Phone: (802) 793-1430 Cell: (802) 793-1430	N/A Email: N/A Phone: N/A Cell: N/A	THE AUTOMASTER PO BOX 220 SHELburnE VT 05482 Salesperson: Deal Number: 207506

THIS BUYER'S ORDER IS ☐ NEW ☒ USED ☒ CAR ☐ TRUCK ☐ DEMO
FOR THE FOLLOWING ☒ PERSONAL ☐ FAMILY ☐ BUSINESS

Deal Number: 207506

TO BE DELIVERED
ON OR ABOUT 12/29/2020

Year	Make	Model	Type	Trim	Color	Mileage	Stock #
2018	BMW	SAV X5	XDRIVE35I S	XDRIVE35I	WHITE ALPIN	20293	P9541
TRADE IN RECORD 1							
YR.	MAKE	MODEL	TYPE		VIN		
N/A	N/A	N/A	N/A		5UXKR0C5XJ0X83916		
COLOR	TRIM	MILEAGE		PRICE OF VEHICLE →			
N/A	N/A	N/A		\$ 44597.17			
VIN	TITLE NO.			Seller Accessories			
N/A	N/A			Documentation Fee			
OWNER	PLATE NO.	EXP. DATE	199.00				
N/A	N/A	N/A	N/A				
LIENHOLDER	LOAN #	N/A					
N/A	N/A	N/A					
ADDRESS	PHONE	N/A					
N/A	N/A	N/A					
AMOUNT	SPOKE WITH	N/A					
N/A	N/A	N/A					
TRADE IN RECORD 2							
YR.	MAKE	MODEL	TYPE		VIN		
N/A	N/A	N/A	N/A		N/A		
COLOR	TRIM	MILEAGE		N/A			
N/A	N/A	N/A		N/A			
VIN	TITLE NO.			N/A			
N/A	N/A			N/A			
OWNER	PLATE NO.	EXP. DATE	N/A				
N/A	N/A	N/A	N/A				
LIENHOLDER	LOAN #	N/A					
N/A	N/A	N/A					
ADDRESS	PHONE	N/A					
N/A	N/A	N/A					
AMOUNT	SPOKE WITH	N/A					
N/A	N/A	N/A					
COLLISION COVERAGE							
NAME OF AGENT			PHONE				
GEICO			(800)841-3000				
ADDRESS			N/A				
3617 CROSSPOINT PKWY			N/A				
GETZVILLE NY 14068			N/A				
POLICY NUMBER			Manufacturer Rebate				
4612542326			N/A				
INSURANCE CO.			Cash Price				
GEICO			44796.17				
EFFECTIVE DATE			Downpayment				
EXP. DATE			N/A				
SPOKE WITH			N/A				
VERIFIED BY			N/A				

THAN SELLER ARE THEIRS, NOT SELLER'S. ONLY SUCH MANUFACTURER OR OTHER SUPPLIER SHALL BE LIABLE FOR PERFORMANCE UNDER SUCH WARRANTIES, UNLESS SELLER FURNISHES BUYER WITH A SEPARATE WRITTEN WARRANTY OR SERVICE CONTRACT MADE BY SELLER ON ITS OWN BEHALF. SELLER NEITHER ASSUMES NOR AUTHORIZES ANY PERSON TO ASSUME FOR IT ANY LIABILITY IN CONNECTION WITH THE SALE OF ANY PRODUCTS.

Unless the Seller makes a written warranty, or enters into a service contract within 90 days from the date of this contract, this vehicle is sold "AS IS" and "WITH ALL FAULTS." The Seller makes no warranties, express or implied, on the vehicle, and there will be no implied warranties of merchantability or of fitness for a particular purpose. This provision does not affect any warranties covering the vehicle that the vehicle manufacturer may provide. Buyer acknowledges receipt of any warranty information prior to the sale of the vehicle.

Buyer's Initials _____ Co-Buyer's Initials N/A

NO COOLING OFF PERIOD

State law does not provide for a "cooling off" or cancellation period for this sale. After you sign this contract, you may only cancel it if the seller agrees or for legal cause. You cannot cancel this contract simply because you change your mind. This notice does not apply to home solicitation sales.

DOCUMENTATION FEE

The Documentation Fee represents Seller costs such as administrative services, notary services, courier expense and cleaning, inspecting and adjusting new and used vehicle inventories as well as additional Seller profit. It is not a government fee.

NEGATIVE EQUITY

Buyer is aware the balance owed on Buyer's trade-in exceeds the trade-in allowance offered by Seller. Accordingly, Buyer understands that N/A will be paid off on Buyer's behalf to N/A and this amount is included when computing the "balance due."

I certify that I took delivery of this vehicle on 12/29/2020

Customer initials: _____

TERMS OF PAYMENT OF BALANCE DUE:

☐ RETAIL INSTALLMENT SALE CONTRACT

☐ OTHER N/A

For your protection, request a receipt for all payments you make.

This Agreement is not binding upon either Seller or Buyer until signed by an authorized Seller representative.

If Buyer is buying this Vehicle in a credit sale transaction evidenced by a retail installment sale contract, this Agreement is binding when the retail installment sale contract is signed, but will not remain binding if a third party finance source does not agree to purchase the retail installment sale contract executed by Buyer and Seller based on this Agreement on the terms as submitted. See paragraph 10 on the other side of this Agreement, which shall survive the termination of this agreement for any reason.

Buyer agrees that this Agreement includes all of the terms and conditions on the front and back side hereof, that this Agreement cancels and supersedes any prior agreement including oral agreements, and as of the date below comprises; together with any retail installment sale contract the complete and exclusive statement of the terms of the agreement relating to the subject matters covered by this Agreement.

Buyer certifies that he/she is at least 18 years of age.

Buyer, by signing this Agreement, acknowledges that Buyer has read and agrees to its terms and has received a true copy of this Agreement.

BUYER SIGNS X _____

DATE 12/29/2020

CO-BUYER SIGNS X N/A

DATE N/A

MANAGER'S APPROVAL

(Must Be Accepted By An Authorized Representative of the Seller)

X _____

DATE 12/29/2020

LAW FORM NO. LAWVT-80 (Rev. 9/20)

© 2021 The Reynolds and Reynolds Company. TO ORDER: www.reynolds.com, 1-800-344-6926, 24 HOURS: 1-800-531-9055

THE SELLER MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO THE FITNESS FOR PURPOSE OF THIS FORM. CONSULT YOUR LOCAL COUNSEL.

Payoff Made by Seller		N/A
Cash		N/A
Non-Manufacturer Rebate	25000.00	
		N/A
		N/A
		N/A
Total Downpayment	25000.00	
		N/A
Unpaid Balance of Cash Price (Cash Price - Total Downpayment)	19796.17	
Optional Credit Insurance		N/A
Optional Gap Contract		N/A
Official Fees Government Agencies	35.00	
Government Taxes Not Included In Cash Price	2099.89	
Government License and/or Registration Fees		N/A
Government Certificate of Title Fees	35.00	
Service Contracts		N/A
MAINTENANCE PLAN UPGRADE	2900.00	
		N/A
		N/A
		N/A
Balance Due	\$ 24866.06	



What is this? No clue!

State of Vermont
Department of Taxes
133 State Street
Montpelier, VT 05633-1401

Agency of Administration

00234

Aug 4, 2020

NANCY J DUMONT
1241 TABER HILL RD
STOWE VT 05672-4440

Letter ID: L1068494336
Account ID: PIT-10220471
Tax: Personal Income
Period: Dec-31-2019

Notice Of Assessment

We are sending this notice because you have an outstanding balance with the Department of Taxes.

What are the reasons for the assessment?

Late Payment Interest and Penalty: You failed to pay a sufficient amount of tax or did not pay your total tax by the due date. Vermont law states that tax due must be paid by the original due date even if you request an extension of time to file. If the tax due is not paid on time, the Department will assess interest and penalty on the unpaid liability. More information on penalty and interest can be found on tax return instructions or www.tax.vermont.gov.

You must respond to this notice in one of the following ways:

- **WITHIN 60 DAYS- File an appeal if you disagree with this Assessment.** Additional information about the appeals process is enclosed.
- **Pay the amount detailed on the enclosed Statement of Account.**

Your Right to Appeal

This notice provides information on your tax liability or an adjustment made on your return that will become final in 60 days if you do not file an appeal. If you disagree with any portion of this notice, the time to contest it is NOW. To contest this notice you must file a formal appeal. Your appeal must be in writing. Please see information on how to appeal at the end of this letter. The date we need to receive your appeal to be considered timely is noted in the "Formal Appeal Information."

Your Statement of Account

The enclosed Statement of Account displays a current listing of the tax, interest, and penalties you owe related to the specific tax type(s) detailed. We urge you to pay the entire balance due now in order to avoid additional penalty and interest. You are required to pay the "Minimum Owed."

Interest and Penalties

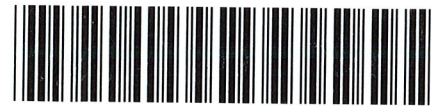
Interest and penalties accrue on all unpaid balances. Additional information about interest and penalties is provided on the Department's website at www.tax.vermont.gov.

If you have any questions regarding your account, please contact us at the number listed below.

Vermont Department of Taxes
Individual Income Tax Section

Phone: (802) 828-2865
(866) 828-2865 (Toll-Free in Vermont)
Fax: (802) 828-2720
Email: tax.individualincome@vermont.gov





* 1 5 6 1 0 1 1 0 0 *

VT Form
TAX-610

**TAXPAYER APPEAL
FORM**

Date of Notice: Aug-04-2020

Name of Taxpayer (Individual or Entity): NANCY J DUMONT	Letter ID Number: L1068494336
	Account ID:: PIT-10220471

I disagree with the Department's assessment for the following reasons:

Signature Required

Signature of Taxpayer	Date	Daytime telephone number (optional)
Printed Name	E-mail address (optional)	

Mail this form with supporting documents and information to:

VT Department of Taxes
PO Box 1900
Montpelier, VT 05601-1900



☐ VOID ☐ CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. PALL SPERA COMPANY REALTORS, LLC PO BOX 539 STOWE, VT 056720539 802-253-9771			OMB No. 1545-0116 2020 Form 1099-NEC		Nonemployee Compensation				
1 Nonemployee compensation \$ 67671.53			Copy 2 To be filed with recipient's state income tax return, when required						
PAYER'S TIN 03-0229189	RECIPIENT'S TIN 030-64-0942	2							
3									
4 Federal income tax withheld \$									
RECIPIENT'S name, Street address (including apt. no.), City or town, state or province, country, and ZIP or foreign postal code DuMont, Nancy 1241 Taber Hill Rd. Stowe VT 05672			5 State tax withheld \$ \$		6 State/Payer's state no.				
FATCA filing requirement <input type="checkbox"/>									
Account number (see instructions)			7 State income \$ \$						

Form **1099-NEC**

www.irs.gov/Form1099NEC

Department of the Treasury - Internal Revenue Service

FORM # LNECRECST



888 Brannan Street
San Francisco, CA 94103
Airbnb tax ID number: 26-3051428

Earnings Summary for Nancy DuMont

January 01, 2020 - December 31, 2020

User ID: 98029871

Report Generated: July 22, 2021

Accounts

Payment Method / Account	Gross Earnings ?	-	Airbnb Service Fees	=	Total Paid ?
.....8885 (USD)	\$43,586.00		\$1,236.63		\$42,349.37
Total	\$43,586.00		\$1,236.63		\$42,349.37

Listings

Listing	Reservations	Nights	Gross Earnings ?	-	Airbnb Service Fees	=	Total Paid ?
BEARfoot Bungalow	32	121	\$41,221.00		\$1,236.63		\$39,984.37
Other Earnings ?	0	0	\$2,365.00		\$0.00		\$2,365.00

Total	32	121	\$43,586.00	\$1,236.63	\$42,349.37
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Have questions? [Learn more about your earnings summary in the help center.](#)

The earnings summary shows your earnings in USD for reservations on Airbnb for the 2020 calendar year. Cancelled reservations do not contribute to the Reservations or Nights totals on the Earnings Summary. If you received a Form 1099-K from Airbnb, the figure in “Number of payment transactions” (Box 3) may differ from what is presented in the Earnings Summary. The summary is current as of the indicated date and is provided for your convenience. It is your responsibility to determine what amount to report as taxable income on your US income tax return. We encourage you to consult a tax professional if you need advice on reporting your income.