|   |            | CORRE                       | CTED (if checked)                       |  |   |
|---|------------|-----------------------------|---|--|---|
| PAYER'S name, street address, city or town, state or province, country, ZIP |            |                             | Payer's RTN (optional)                  | OMB No. 1545-0112                        | ]   |
| or foreign postal code, and telephone                                       | no.        |                             |   |  | Interest                                  |
|   |            |                             |   | <b>2020</b>                              | Interest                                  |
|   |            |                             | 1 Interest income                       |  | Income                                    |
| DIGITAL FEDERAL CREDI 220 DONALD LYNCH BLVI                                 |            |                             |   | Form <b>1099-INT</b>                     |   |
| MARLBOROUGH MA 01752  |            |                             | \$ 91.39                                |  |   |
|   |            |                             | 2 Early withdrawal penalty              |  | Сору В                                    |
|   | T          |                             |   |  |   |
| PAYER'S TIN RECIPIENT'S TIN   |            |                             | \$                                      | For Recipient                            |   |
|   |            |                             | 3 Interest on U.S. Savings Bor          | nds and Treas. obligations               |   |
| 04-2683316  | XXX-XX-875 | 51                          | \$                                      |  |   |
| RECIPIENT'S name  |            |                             | 4 Federal income tax withheld           | 5 Investment expenses                    | This is important tax                     |
| VENKAT RAJEEV REDDY M   | MALIPEDDI  |                             | \$                                      | \$                                       | information and is being furnished to the |
|   |            |                             | 6 Foreign tax paid                      | 7 Foreign country or U.S. possession     | IRS. If you are                           |
| Street address (including apt. no.)   |            |                             | \$                                      |  | required to file a                        |
| 611 Watts Circle  |            |                             | 8 Tax-exempt interest                   | Specified private activity bond interest | return, a negligence penalty or other     |
|   |            |                             |   | . Interest                               | sanction may be                           |
| City or town, state or province, country, and ZIP or foreign postal code    |            |                             | \$                                      | \$                                       | imposed on you if<br>this income is       |
| NASHVILLE TN 37209  |            |                             | 10 Market discount                      | 11 Bond premium                          | taxable and the IRS                       |
|   |            |                             |   |  | determines that it has                    |
|   |            | FATCA filing<br>requirement | т                                       | \$                                       | not been reported.                        |
|   |            |                             | 12 Bond premium on Treasury obligations | 13 Bond premium on tax-exempt bond       |   |

5779727 Form **1099-INT** 

Account number (see instructions)

(keep for your records)

www.irs.gov/Form1099INT

14 Tax-exempt and tax credit bond CUSIP no.

Department of the Treasury - Internal Revenue Service

17 State tax withheld

**15** State **16** State identification no.

#### Instructions for Recipient

The information provided may be different for covered and noncovered securities. For a description of covered securities, see the Instructions for Form 8949. For a taxable covered security acquired at a premium, unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize the premium under section 171, or for a tax-exempt covered security acquired at a premium, your payer generally must report either (1) a net amount of interest that reflects the offset of the amount of interest paid to you by the amount of premium amortization allocable to the payment(s), or (2) a gross amount for both the interest paid to you and the premium amortization allocable to the payment(s). If you did notify your payer that you did not want to amortize the premium on a taxable covered security, then your payer will only report the gross amount of interest paid to you. For a noncovered security acquired at a premium, your payer is only required to report the gross amount of interest paid to you.

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.

FATCA filing requirement. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions for Form 8038

**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, new clean renewable energy bonds, qualified energy conservation bonds, qualified zone academy bonds, qualified school construction bonds, and build America bonds that must be included in your interest income. These amounts were treated as paid to you during 2020 on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912. See the instructions above for a taxable covered security acquired at a premium.

**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 Forms 1040 and 1040-SR 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 all be taxable. See Pub. 550. This interest is exempt from state and local income taxes. This interest is not included in box 1. See the instructions above for a taxable covered security acquired at a premium.
- **Box 4.** Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your TIN or you did not furnish the correct TIN to the payer. See Form W-9. 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. This amount is included in box 1. **Note:** This amount is not deductible
- **Box 6.** Shows foreign tax paid. You may be able to claim this tax as a deduction or a credit on your Form 1040 or 1040-SR. See your tax return instructions.
- Box 7. Shows the country or U.S. possession to which the foreign tax was paid.
- **Box 8.** Shows tax-exempt interest paid to you during the calendar year by the payer. See how to report this amount in the Instructions for Forms 1040 and 1040-SR. This amount may be subject to backup withholding. See *Box 4* above. See the instructions above for a tax-exempt covered security acquired at a premium.
- **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. See the instructions above for a tax-exempt covered security acquired at a premium.
- Box 10. For a taxable or tax-exempt covered security, if you made an election under section 1278(b) to include market discount in income as it accrues and you notified your payer of the election in writing in accordance with Regulations section 1.6045-1(n)(5), shows the market discount that accrued on the debt instrument during the year while held by you, unless it was reported on Form 1099-OID. For a taxable or tax-exempt covered security acquired on or after January 1, 2015, accrued market discount will be calculated on a constant yield basis unless you notified your payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to make a constant yield election for market discount under section 1276(b). Report the accrued market discount on your income tax return as directed in the Instructions for Forms 1040 and 1040-SR. Market discount on a tax-exempt security is includible in taxable income as interest income.

(Continued on the back of Copy 2.)

## Instructions for Recipient (continued)

**Box 11.** For a taxable covered security (other than a U.S. Treasury obligation), shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040 or 1040-SR) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the security. If an amount is not reported in this box for a taxable covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 1. If the amount in box 11 is greater than the amount of interest paid on the covered security, see Regulations section 1.171-2(a)(4).

**Box 12.** For a U.S. Treasury obligation that is a covered security, shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040 or 1040-SR) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the U.S. Treasury obligation. If an amount is not reported in this box for a U.S. Treasury obligation that is a covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 3. If the amount in box 12 is greater than the amount of interest paid on the U.S. Treasury obligation, see Regulations section 1.171-2(a)(4).

**Box 13.** For a tax-exempt covered security, shows the amount of premium amortization allocable to the interest payment(s). If an amount is reported in this box, see Pub. 550 to determine the net amount of tax-exempt interest reportable on Form 1040 or 1040-SR. If an amount is not reported in this box for a tax-exempt covered security acquired at a premium, the payer has reported a net amount of interest in box 8 or 9, whichever is applicable. If the amount in box 13 is greater than the amount of interest paid on the tax-exempt covered security, the excess is a nondeductible loss. See Regulations section 1.171-2(a)(4)(ii).

**Box 14.** Shows CUSIP number(s) for tax-exempt bond(s) on which tax-exempt interest was paid, or tax credit bond(s) on which taxable interest was paid or tax credit was allowed, to you during the calendar year. If blank, no CUSIP number was issued for the bond(s).

Boxes 15-17. State tax withheld reporting boxes.

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 with the Internal Revenue Service Center for your area. On Form 1096, list yourself as the "filer." A spouse is not required to file a nominee return to show amounts owned by the other spouse.

**Future developments.** For the latest information about developments related to Form 1099-INT and its instructions, such as legislation enacted after they were published, go to <a href="https://www.irs.gov/Form1099INT">www.irs.gov/Form1099INT</a>.

|   | D (if checked)  |                             | ·  |                |  | 1               | Distributions From                           |
|---|---|-----------------------------|--|----------------|--|-----------------|--|
| PAYER'S TIN   | RECIPIENT'S TIN   |                             | 1 Gross distribution                       | 420 27         | OMB No. 1545-0119  |                 | Pensions, Annuities,                         |
| 04-6568107  | xxx-xx-8751   |                             | <b>Φ1,</b> 2                               | 420. 37        | 2020   |                 | Retirement or<br>Profit-Sharing Plans,       |
| PAYER'S name, street address, city, state, ar                                   | nd ZIP code   |                             | 2a Taxable amount                          |                |  |                 | IRAs, Insurance                              |
| FIDELITY INVESTMENTS  |   |                             | <b>24</b> Taxabib ambani                   | \$0.00         | Form <b>1099-R</b>                                       |                 | Contracts, etc.                              |
| INSTITUTIONAL OPERAT  |   |                             |  |                | <u> </u>   | <u> </u>        |  |
| 100 MAGELLAN WAY KW   |   |                             | 2b Taxable amount                          |                | Total  |                 | Сору В                                       |
| COVINGTON, KY 41015   | -1987<br>1-800-425-   | 2242                        | not determined                             | 1: 1 0 )       | distribution   | 24.1            | Report this income                           |
| 59208<br>  VANDERBI LT UNI VERSI T  |   | 2303                        | 3 Capital gain (include                    | \$0. 00        | 4 Federal income tax v                                   | \$0. OC         | on your federal tax<br>return. If this form  |
| VANDERBIET ON VERSIT  | 1   |                             |  | <b>ФО. ОО</b>  |  | <b>\$</b> 0. 00 | shows federal income                         |
| RECIPIENT'S name, street address (including                                     | g apt. no.), citv. state, and ZIP                             | code                        | 5 Employee contrib/de                      | esia Roth      | 6 Net unrealized appre                                   | ciation         | tax withheld in box 4,                       |
| eDelivery   | , , , , , , , , , , , , , , , , , , ,                         |                             | contrib or insurance                       | premiums       | in employer's securitie                                  |                 | attach this copy                             |
|   |   |                             |  | \$0.00         |  | \$0.00          | to your return.                              |
| Venkat Rajee Mali   | peddi   |                             | 7 Distribution code(s)                     |                | 8 Other  | %               | This information is being                    |
| 1-7-15 1st floor  |   |                             |  | SIMPLE         |  | Φ0.00           | furnished to the Internal                    |
| JSN Collony, ST No  | ): 8  |                             | G  | <u> </u>       | 01 T / 1   | \$0.00          | Revenue Service.                             |
| Tel angana 500007<br>Habsi guda Hyderab   | ad  |                             | 9a Your percentage o<br>total distribution | Σ              | 9b Total employee con                                    | tributions      | 10 Amount allocable to IRR within 5 years    |
| I N   | du  |                             | total distribution                         | %              | \$   |                 | \$0. 00                                      |
|   |   |                             | 14 State tax withheld                      |                | 15 State/Payer's state r                                 | 10.             | 16 State distribution                        |
|   |   |                             |  |                | ,  |                 |  |
|   | 11 1st year of desig.Roth                                     | 12 FATCA filing             |  | \$0.00         | TN   |                 | \$   |
|   | contrib.  | requirement                 | 13 Date of payment                         |                |  |                 |  |
| Form <b>1099-R</b>  |   |                             |  |                | Departn  | nent of the Tre | asury - Internal Revenue Service             |
|   |   |                             |  |                |  |                 |  |
|   | *59208  | 00000000020R                | <b>(</b> *                                 |                |  |                 |  |
| ☐ CORRECTE  | D (if checked)  |                             |  |                |  |                 | Distributions From                           |
| PAYER'S TIN   | RECIPIENT'S TIN   |                             | 1 Gross distribution                       |                | OMB No. 1545-0119  |                 | Pensions, Annuities,                         |
| 04-6568107  | xxx-xx-8751   |                             |  | 420. 37        |  |                 | Retirement or                                |
|   |   |                             |  |                | 2020   |                 | Profit-Sharing Plans,                        |
| PAYER'S name, street address, city, state, ar                                   |   |                             | 2a Taxable amount                          |                |  |                 | IRAs, Insurance                              |
| FIDELITY INVESTMENTS  |   |                             |  | \$0.00         | Form <b>1099-R</b>                                       |                 | Contracts, etc.                              |
| I NSTI TUTI ONAL OPERAT   |   |                             |  |                |  |                 |  |
| 100 MAGELLAN WAY KW<br>COVINGTON, KY 41015                                      |   |                             | 2b Taxable amount                          | Ш              | Total  | 1               | Copy C<br>For Recipient's                    |
| 59208   | 1-800-425-  | 2363                        | not determined  3 Capital gain (include    | ed in hov 2a)  | distribution  4 Federal income tax v                     | vithhold        | Records                                      |
| VANDERBILT UNIVERSIT  |   | 2303                        | 3 Capital gain (include                    | \$0.00         | 4 i ederar income tax v                                  | \$0. 00         | Necords                                      |
|   |   |                             |  | +0.00          |  | +0.00           |  |
| RECIPIENT'S name, street address (including                                     | g apt. no.), city, state, and ZIP                             | code                        | 5 Employee contrib/de                      | esig Roth      | 6 Net unrealized appre                                   | ciation         |  |
|   |   |                             | contrib or insurance                       |                | in employer's securitie                                  | es              |  |
|   |   |                             |  | \$0.00         |  | \$0.00          |  |
| Venkat Rajee Mali   | peddi   |                             | 7 Distribution code(s)                     |                | 8 Other  | %               | This information is being                    |
| 1-7-15 1st floor  |   |                             | _  | SIMPLE         |  | 40 00           | furnished to the Internal                    |
| JSN Colony, ST No<br>Tel angana 500007  | ). O  |                             | G  9a Your percentage o                    | <u> </u>       | 9b Total employee con                                    | \$0.00          | Revenue Service.  10 Amount allocable to IRR |
| Habsi guda Hyderab  | ad  |                             | total distribution                         | И              | 9b Total employee com                                    | IIIDUIIOIIS     | within 5 years                               |
| I N   |   |                             | total diotribution                         | %              | \$   |                 | \$0.00                                       |
|   |   |                             | 14 State tax withheld                      |                | 15 State/Payer's state r                                 | 10.             | 16 State distribution                        |
|   |   |                             |  |                |  |                 |  |
|   | 11 1st year of desig.Roth                                     | 12 FATCA filing             |  | \$0.00         | TN   |                 | \$   |
|   | contrib.  | requirement                 | 13 Date of payment                         |                |  |                 |  |
| Form <b>1099-R</b>  |   | (keep for your r            | ecoras)                                    |                | Departn  | nent of the Tre | asury - Internal Revenue Service             |
|   |   |                             |  |                |  |                 |  |
|   |   |                             |  |                |  |                 |  |
| CORRECTE  | D (if checked)  |                             |  |                |  | _               | Distributions From                           |
| PAYER'S TIN   | RECIPIENT'S TIN   |                             | 1 Gross distribution                       | 400 5-         | OMB No. 1545-0119  |                 | Pensions, Annuities,                         |
| 04-6568107  | xxx-xx-8751   |                             | \$1, 4                                     | 420. 37        | 2020   |                 | Retirement or                                |
| DAVEDIO   | - 1 7ID 1-  |                             | On Township and and                        |                | 2020   |                 | Profit-Sharing Plans,                        |
| PAYER'S name, street address, city, state, an FIDELITY INVESTMENTS              |   |                             | 2a Taxable amount                          | \$0.00         | Form <b>1099-R</b>                                       |                 | IRAs, Insurance<br>Contracts, etc.           |
| I NSTI TUTI ONAL OPERAT   |   |                             |  | ΨΟ. ΟΟ         | 1 01111 1033-K   | ļ               | Contracts, etc.                              |
| 100 MAGELLAN WAY KW   |   |                             | 2b Taxable amount                          |                | Total  |                 | Copy 2                                       |
| COVINGTON, KY 41015   | -1987   |                             | not determined                             |                | distribution   |                 | File this copy                               |
| 59208   | 1-800-425-  | 2363                        | 3 Capital gain (include                    |                | 4 Federal income tax v                                   |                 | with your state,                             |
| VANDERBILT UNIVERSIT  | Υ   |                             |  | \$0.00         |  | \$0.00          | city, or local                               |
| DECIDIENTIO   |   |                             | F.F I trib (d)                             | D              | C Not were allered arrange                               | -1-41           | income tax<br>return, when                   |
| RECIPIENT'S name, street address (including                                     | g apt. no.), city, state, and ZIP                             | code                        | 5 Employee contrib/de                      | -              | 6 Net unrealized appre                                   |                 | return, when                                 |
| 1   | contrib or insurance premiums in employer's securities \$0.00 |                             | \$0.00                                     | required       |  |                 |  |
|   |   | Venkat Rajee Malipeddi      |  |                |  | %               |  |
| Venkat Rajee Mali   | peddi   |                             | 7 Distribution code(s)                     | IRA/SEP/       | 8 Other  |                 |  |
| 1-7-15 1st floor  | •   |                             | , ,  | SIMPLE         |  |                 |  |
| 1-7-15 1st floor<br>JSN Colony, ST No   | •   |                             | G  | SIMPLE         |  | \$0.00          |  |
| 1-7-15 1st floor<br>JSN Colony, ST No<br>Telangana 500007                       | o: 8  |                             | G  9a Your percentage o                    | SIMPLE         | 9b Total employee conf                                   |                 | 10 Amount allocable to IRR                   |
| 1-7-15 1st floor<br>JSN Colony, ST No<br>Telangana 500007<br>Habsi guda Hyderab | o: 8  |                             | G  | SIMPLE         | 9b Total employee conf                                   |                 | within 5 years                               |
| 1-7-15 1st floor<br>JSN Colony, ST No<br>Telangana 500007                       | o: 8  |                             | G  9a Your percentage o total distribution | SIMPLE         | 9b Total employee con                                    | tributions      | within 5 years \$0.00                        |
| 1-7-15 1st floor<br>JSN Colony, ST No<br>Telangana 500007<br>Habsi guda Hyderab | o: 8  |                             | G  9a Your percentage o                    | SIMPLE         | 9b Total employee conf                                   | tributions      | within 5 years                               |
| 1-7-15 1st floor JSN Colony, ST No Tel angana 500007 Habsi guda Hyderab I N     | o: 8  | 12 FATCA filing             | G  9a Your percentage o total distribution | SIMPLE         | 9b Total employee con                                    | tributions      | within 5 years \$0.00                        |
| 1-7-15 1st floor JSN Colony, ST No Tel angana 500007 Habsi guda Hyderab         | o: 8<br>oad   | 12 FATCA filing requirement | G  9a Your percentage o total distribution | SIMPLE  SIMPLE | 9b Total employee cons<br>\$<br>15 State/Payer's state r | tributions      | within 5 years \$0.00                        |

#### Instructions for Recipient

Generally, distributions from retirement plans (IRAs, qualified plans, section 403(b) plans, and governmental section 457(b) plans), insurance contracts, etc. are reported to recipients on Form 1099-R

Qualified plans and section 403(b) plans. If your annuity starting date is after 1997, you must use the simplified method to figure your taxable amount if your payer did not show the taxable amount in box 2a. See the Instructions for your tax return

**IRAs.** For distributions from a traditional individual retirement arrangement (IRA), simplified employee pension (SEP), or savings incentive match plan for employees (SIMPLE), generally the payer is not required to compute the taxable amount. See the instructions for your tax return to determine the taxable amount. If you are at least age 701/2 by the end of 2019 (age 72 by the end of later years), you must take minimum distributions from your IRA (other than a Roth IRA). If you do not, you are subject to a 50% excise tax on the amount that should have been distributed. See Pub. 590-A and Pub. 590-B for more information on IRAs. Roth IRAs. For distributions from a Roth IRA, generally the payer is not required to compute the taxable amount. You must compute any taxable amount on Form 8606. An amount shown in box 2a may be taxable earnings on an excess contribution. Loans treated as distributions. If you borrow money from a qualified plan, section 403(b) plan, or governmental section 457(b) plan, you may have to treat the loan as a distribution and include all or part of the amount borrowed in your income. There are exceptions to this rule. If your loan is taxable, Code L will be shown in box 7. See Pub. 575. Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (SSN,ITIN,ATIN,or EIN). However, the payer has reported your complete TIN to the IRS. **Account number.** May show an account, policy, or other unique number the payer assigned to distinguish your account.

Box 1. Shows the total amount you received this year. The amount may have been a direct rollover, a transfer or conversion to a Roth IRA, a recharacterized IRA contribution; or you may have received it as periodic payments, as nonperiodic payments, or as a total distribution. Report the amount on Form 1040, 1040-SR or 1040-NR on the line for "IRAs, pensions and annuities" (or the line for "Taxable amount"), and on Form 8606, as applicable. However, if this is a lump-sum distribution, see Form 4972. If you have not reached minimum retirement age, report your disability payments on the line for "Wages, salaries, tips, etc." on your tax return. Also report on that line permissible withdrawals from eligible automatic contribution arrangements and corrective distributions of excess deferrals, excess contributions, or excess aggregate contributions except if the distribution is of designated Roth contributions or your after-tax contributions or if you are self-employed. If a life insurance, annuity, qualified long-term care, or endowment contract was transferred tax free to another trustee or contract issuer, an amount will be shown in this box and Code 6 will be shown in box 7. If a charge or payment was made against the cash value of an annuity contract or the cash surrender value of a life insurance contract for the purchase of qualified long-term care insurance, an amount will be shown in this box and Code W will be shown in box 7. You need not report these amounts on your tax return .If code C is shown in box 7, the amount shown in box 1 is a receipt of reportable death benefits that is taxable in part. **Box 2a**. This part of the distribution is generally taxable there is no entry in this box, the payer may not have all the facts needed to figure the taxable amount. In that case, the first box in box 2b should be checked. You may want to get one of the free publications from the IRS to help you figure the taxable amount. See Additional information on the back of Copy 2. For an IRA distribution, see IRAs and Roth IRAs, earlier. For a direct rollover, other than from a qualified plan sec. 403(b) plan, or governmental sec. 457(b) plan to a designated Roth account in the same plan or to a Roth IRA, zero should be shown, and you must enter zero (-0-) on the "Taxable amount" line of your tax return. If you roll over a distribution (other than a distribution from a designated Roth account) from a qualified plan, sec. 403(b) plan, or governmental sec. 457(b) plan to a designated Roth account in the same plan or to a Roth IRA, (Continued on the back of Copy C.)

#### Instructions for Recipient (Continued)

you must include on the "Taxable amount" line of your tax return the amount shown in this box plus the amount in box 6, if any. If this is a total distribution from a qualified plan and you were born before January 2, 1936 (or you are the beneficiary of someone born before January 2, 1936), you may be eligible for the 10-year tax option. See the Form 4972 instructions for more information. If you are an eligible retired public safety officer who elected to exclude from income distributions from your eligible plan used to pay certain insurance premiums, the amount shown in box 2a has not been reduced by the exclusion amount. See the instructions for your tax return for more information. Box 2b. If the first box is checked, the payer was unable to determine the taxable amount, and box 2a should be blank, except for an IRA. It is your responsibility to determine the taxable amount. If the second box is checked, the distribution was a total distribution that closed out your account. **Box 3.** If you received a lump-sum distribution from a qualified plan and were born before January 2, 1936 (or you are the beneficiary of someone born before January 2, 1936), you may be able to elect to treat this amount as a capital gain on Form 4972 (not on Schedule D (Forms 1040 and 1040-SR)). See the Form 4972 instructions For a charitable gift annuity, report as a long-term capital gain as explained in the instructions for Form 8949. **Box 4.** Shows federal income tax withheld. Include this amount on your income tax return as tax withheld, and if box 4 shows an amount (other than zero), attach Copy B to your return. Generally, if you will receive payments next year that are not eligible rollover distributions, you can change your withholding or elect not to have income tax withheld by giving the payer Form W-4P. Box 5. Generally, this shows the employee's investment in the contract (after-tax contributions), if any, recovered tax free this year; the portion that is your basis in a designated Roth account; the part of premiums paid on commercial annuities or insurance contracts recovered tax free; the nontaxable part of a charitable gift annuity or the investment in life insurance contract reportable under section 6050Y

This box does not show any IRA contributions. If the amount shown is your basis in a designated Roth account, the year you first made contributions to that account may be entered in box 11. Box 6. If you received a lump-sum distribution from a qualified plan that includes securities of the employer's company, the net unrealized appreciation (NUA) (any increase in value of such securities while in the trust) is taxed only when you sell the securities unless you choose to include it in your gross income this year. See Pub. 575 and the Form 4972. If you roll over the distribution to a designated Roth account in the same plan or to a Roth IRA, see the instructions for box 2a. For a direct rollover to a designated Roth account in the same plan or to a Roth IRA, the NUA is included in box 2a. If you did not receive a lump-sum distribution, the amount shown is the NUA attributable to employee contributions, which is not taxed until you sell the securities.

**Box 7.** The following codes identify the distribution you received. For more information on these distributions, see the instructions for your tax return. Also, certain distributions may be subject to an additional 10% tax. See the instructions for Form 5329.

- -Early distribution, no known exception (in most cases, under age 59 1/2).
- 2—Early distribution, exception applies (under age 59 ½). 3—Disability. 4—Death.
- -Prohibited transaction. 6—Section 1035 exchange (a tax-free exchange of life insurance, annuity, qualified long-term care insurance or endowment contracts). 7—Normal distribution. 8—Excess contributions plus earnings/excess deferrals (and/or earnings) taxable in 2020. 9— Cost of current life insurance protection. A—May be eligible for 10-year tax option (see Form 4972). B-Designated Roth account distribution. Note. If Code B is in box 7 and an amount is reported in box 11, see the instructions for Form 5329. C—Reportable death benefits under section 6050Y

(Continued on the back of Copy 2.)

#### Instructions for Recipient (Continued)

D-Annuity payments from nonqualified annuities that may be subject to tax under section T411.E—Distributions under Employee Plans Compliance Resolution System (EPCRS).

F—Charitable gift annuity. G—Direct rollover of a distribution to a qualified plan, a section 403(b) plan, a governmental section 457(b) plan, or an IRA. H-Direct rollover of a designated Roth account distribution to a Roth IRA. J-Early distribution from a Roth IRA, no known exception (in most cases, under age 59 ½). **K** – Distribution for traditional IRA assets not having a readily available FMV. **L**—Loans treated as distributions. **M**— Qualified plan loan offset. **N**—Recharacterized IRA contribution made for 2020 and recharacterized in 2020. **P**—Excess contributions plus earnings/excess deferrals (and/or earnings) taxable in 2019. **Q**—Qualified distribution from a Roth IRA.**R**—Recharacterized IRA contribution made for 2019 and recharacterized in 2020 **S**—Early distribution or a SIMPLE IRA in first 2 years, no known exception (under age 59 ½). **T**—Roth IRA distribution, exception applies. **U**—Dividend distribution from ESOP under section 404(k). **Note**. This distribution is not eligible for rollover. **W**—Charges or payments for purchasing qualified long-term care insurance contracts under combined arrangements. If the IRA/SEP/SIMPLE box is checked, you have received a traditional IRA, SEP, or SIMPLE

Box 8. If you received an annuity contract as part of a distribution, the value of the contract is shown. It is not taxable when you receive it and should not be included in boxes 1 and 2a. When you receive periodic payments from the annuity contract, they are taxable at that time. If the distribution is made to more than one person, the percentage of the annuity contract distributed to you is also shown. You will

need this information if you use the 10-year tax option (Form 4972). If charges were made for qualified long-term care insurance contracts under combined arrangements, the amount of the reduction in the investment (but not below zero) in the annuity or life insurance contract is reported here. Box 9a. If a total distribution was made to more than one person, the percentage you received is shown. Box 9b. For a life annuity from a qualified plan or from a section 403(b) plan (with after-tax contributions), an amount may be shown for the employee's total investment in the contract. It is used to compute the taxable part of the distribution. See Pub. 575. Box 10. If an amount is reported in this box, see the instructions for Form 5329 and Pub 575. **Box 11.** The 1<sup>st</sup> year you made a contribution to the designated Roth account reported on this form is shown in this box. **Box 12.** If box 12 is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement under FATCA. You may also have a filing requirement. See the Instructions for Form 8938. Box 13. Shows the date of payment for reportable death benefits under section 6050Y. Boxes 14-19. If state or local income tax was withheld from the distribution, boxes 16 and 19 may show the part of the distribution subject to state and/or local tax

Additional information. You may want to see

Form W-4P, Form 4972, Form 5329, Form 8606

Pub. 525, Taxable and Nontaxable Income Pub. 560, Retirement Plans for Small Business

Pub. 571, Tax-Sheltered Annuity Plans

Pub. 575. Pension and Annuity Income

Pub. 590-A, Contributions to IRAs Pub. 590-B, Distributions from IRAs

Pub. 721, U.S. Civil Service Retirement Benefits Pub. 939, General Rule for Pensions and Annuities

Pub. 969. HSAs and Other Tax-Favored Health Plans

# **GOLDMAN SACHS BANK USA**

## **Forwarding Service Requested**

475906/gec004-1167404-/-R000/00000000 VENKAT MALIPEDDI 611 WATTS CIR NASHVILLE TN 37209-4426

| <b>Combined Statement For Form</b> |
|------------------------------------|
| 1099-INT for Tax Year 2020         |

Interest Income - Copy B - For Recipient OMB No. 1545-0112

PAYER'S TIN

13-3571598

**CUSTOMER SERV PH#** 

855-730-7283

RECIPIENT'S TIN XXX-XX-8751

# ☐ FATCA Filing requirement

## **KEEP FOR YOUR RECORDS**

| ACCOUNT NUMBER | IRS DESCRIPTION                                       | IRS<br>BOX # | AMOUNT |
|----------------|---|--------------|--------|
| 300015366841   | Interest Income                                       | 1            | 285.70 |
|                | Early Withdrawal Penalty                              | 2            | 0.00   |
|                | Interest on U.S. Savings Bonds and Treas. Obligations | 3            | 0.00   |
|                | Federal Income Tax Withheld                           | 4            | 0.00   |
|                | Investment Expenses                                   | 5            | 0.00   |
|                | Foreign Tax Paid                                      | 6            | 0.00   |
|                | Foreign Country or U.S. Possession                    | 7            |        |
|                | Tax-exempt Interest                                   | 8            | 0.00   |
|                | Specified Private Activity Bond Interest              | 9            | 0.00   |
|                | Market Discount                                       | 10           | 0.00   |
|                | Bond Premium  | 11           | 0.00   |
|                | Bond Premium on Treasury Obligations                  | 12           | 0.00   |
|                | Bond premium on tax-exempt bond                       | 13           | 0.00   |
|                | Tax exempt and tax credit bond CUSIP no.              | 14           |        |
|                | State   | 15           |        |
|                | State Identification No.                              | 16           |        |
|                | State Tax Withheld                                    | 17           | 0.00   |



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.

#### Instructions for Recipient

The information provided may be different for covered and noncovered securities. For a description of covered securities, see the Instructions for Form 8949. For a taxable covered security acquired at a premium, unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize the premium under section 171, or for a tax-exempt covered security acquired at a premium, your payer generally must report either (1) a net amount of interest that reflects the offset of the amount of interest paid to you by the amount of premium amortization allocable to the payment(s), or (2) a gross amount for both the interest paid to you and the premium amortization allocable to the payment(s). If you did notify your payer that you did not want to amortize the premium on a taxable covered security, then your payer will only report the gross amount of interest paid to you. For a noncovered security acquired at a premium, your payer is only required to report the gross amount of interest paid to you.

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.

**FATCA filing requirement.** If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You also may have a filing requirement. See the Instructions for Form 8938.

**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, new clean renewable energy bonds, qualified energy conservation bonds, qualified zone academy bonds, qualified school construction bonds, and build America bonds that must be included in your interest income. These amounts were treated as paid to you during 2020 on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912. See the instructions above for a taxable covered security acquired at a premium.

**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 Forms 1040 and 1040-SR 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 all be taxable. See Pub. 550. This interest is exempt from state and local income taxes. This interest is not included in box 1. See the instructions above for a taxable covered security acquired at a premium.

**Box 4.** Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your TIN or you did not furnish the correct TIN to the payer. See Form W-9. 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. This amount is included in box 1. **Note:** This amount is not deductible.

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

**Box 7.** Shows the country or U.S. possession to which the foreign tax was paid.

**Box 8.** Shows tax-exempt interest paid to you during the calendar year by the payer. See how to report this amount in the Instructions for Forms 1040 and 1040-SR. This amount may be subject to backup withholding. See *Box 4* above. See the instructions above for a tax-exempt covered security acquired at a premium.

**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. See the instructions above for a tax-exempt covered security acquired at a premium.

Box 10. For a taxable or tax-exempt covered security, if you made an election under section 1278(b) to include market discount in income as it accrues and you notified your payer of the election in writing in accordance with Regulations section 1.6045-1(n)(5), shows the market discount that accrued on the debt instrument during the year while held by you, unless it was reported on Form 1099-OID. For a taxable or tax-exempt covered security acquired on or after January 1, 2015, accrued market discount will be calculated on a constant yield basis unless you notified your payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to make a constant yield election for market discount under section 1276(b). Report the accrued market discount on your income tax return as directed in the Instructions for Forms 1040 and 1040-SR. Market discount on a tax-exempt security is includible in taxable income as interest income.

**Box 11.** For a taxable covered security (other than a U.S. Treasury obligation), shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040 or 1040-SR) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the security. If an amount is not reported in this box for a taxable covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 1. If the amount in box 11 is greater than the amount of interest paid on the covered security, see Regulations section 1.171-2(a)(4).

Box 12. For a U.S. Treasury obligation that is a covered security, shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040 or 1040-SR) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the U.S. Treasury obligation. If an amount is not reported in this box for a U.S. Treasury obligation that is a covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 3. If the amount in box 12 is greater than the amount of interest paid on the U.S. Treasury obligation, see Regulations section 1.171-2(a)(4).

**Box 13.** For a tax-exempt covered security, shows the amount of premium amortization allocable to the interest payment(s). If an amount is reported in this box, see Pub. 550 to determine the net amount of tax-exempt interest reportable on Form 1040 or 1040-SR. If an amount is not reported in this box for a tax-exempt covered security acquired at a premium, the payer has reported a net amount of interest in box 8 or 9, whichever is applicable. If the amount in box 13 is greater than the amount of interest paid on the tax-exempt covered security, the excess is a nondeductible loss. See Regulations section 1.171-2(a)(4)(ii).

**Box 14.** Shows CUSIP number(s) for tax-exempt bond(s) on which tax-exempt interest was paid, or tax credit bond(s) on which taxable interest was paid or tax credit was allowed, to you during the calendar year. If blank, no CUSIP number was issued for the bond(s).

Boxes 15-17. State tax withheld reporting boxes.

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 with the Internal Revenue Service Center for your area. On Form 1096, list yourself as the "filer." A spouse is not required to file a nominee return to show amounts owned by the other spouse.

**Future developments.** For the latest information about developments related to Form 1099-INT and its instructions, such as legislation enacted after they were published, go to <a href="https://www.irs.gov/Form1099INT">www.irs.gov/Form1099INT</a>.



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.

Marcus by Goldman Sachs® is a brand of Goldman Sachs Bank USA, which is a wholly-owned subsidiary of The Goldman Sachs Group, Inc., a New York State-chartered bank and a member of the Federal Reserve System and FDIC. All savings deposit products provided by Goldman Sachs Bank USA.

IF YOU HAVE QUESTIONS CONTACT: DISCOVER BANK

PHONE: 800-347-7000

VENKAT RAJEEV R MALIPEDDI 1445 BELL TRACE DR ANTIOCH, TN 37013

Instructions for Recipient

INSTRUCTIONS TOF MECIPIENT
The information provided may be different for covered and noncovered securities. For a description of covered securities, see the Instructions for Form 8949. For a taxable covered security acquired at a premium, unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize the premium under section 171, or for a fax-exempt covered security acquired at a premium, your payer generally must report either (1) a net amount of interest that reflects the offset of the amount of interest paid to you be amount of premium amortization allocable to the payment(s), or (2) a gross amount for both the interest paid to you and the premium amortization allocable to the payment(s), for you did notify your payer that you amount of interest paid to you. For a noncovered security acquired at a premium, your payer is only required to report the gross amount of interest paid to you.

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 (TIN), dopton that the taxpayer identification number (TIN), or employer identification number (EIN)). However, the issuer has reported your complete TIN to the IRS.

Recipient a supply a supply a supply and the supply and supply a supply and supply a supply and supply a supply 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, new clean renewable energy bonds, and uplified negree conservation bonds, qualified school construction bonds, and build America bonds that must be included in your interest income. These amounts were treated as paid to you during 2020 on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912. See the instructions above for a taxable covered security acquired at a premium.

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 Forms 1040 and Box 3. Shows interest on U.S. Savings Bonds, Treasury bills, Treasury bonds, and Treasury notes. This may or may not all be taxable. See Pub. 550. This interest is exempt from state and local income taxes. This interest is not included in box 1. See the instructions above for a taxable covered security acquired at a premium.

Box 4. Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your (TIN) or you did not furnish the correct TIN to the payer. See Form W-9. Include this amount on your income tax return as tax withhold

Box 5. Any amount shown is your share of investment expenses of a single-class REMIC. This amount is included in box 1. Note: This amount is not deductible.

In box 1. Note: Inis amount is not deductible.

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

Box 7. Shows the country or U.S. possession to which the foreign tax was paid.

Box 8. Shows tax-exempt interest paid to you during the calendar year by the payer. See how to report this amount in the last rutions for Forms 1040 and 1040 SP. This amount may be subject to backup withholding. See Box 4

above. See the instructions above for a tax-exempt covered security acquired at a premium.

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. See the instructions above for a tax-exempt covered security acquired at a premium.

Box 10. For a taxable or tax-exempt covered security, if you made an election under section 1.78(b) to include market discount in income as it accrues and you notified your payer of the election in writing in accordance with Regulations section 1.6045-1(n)(5), shows the market discount that accrued on the debt instrument during the year while held by you, section 1.6045-1(n)(5), shows the market discount that accrued on the debt instrument during the year while held by you, section 1.6045-1(n)(5), shows the market discount will be calculated on a constant yield basis unless you notified your payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to make a constant yield election for market discount under section 12.76(b). Report the accrued market discount on your income tax return as directed in the Instructions for Forms 1040 and 1040-58. Market discount on a tax-exempt security is includible in taxable concerns as interest income.

Box 11. For a taxable covered security (other than a U.S. Treasury obligation), shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 17.1 if an amount is reported in this income on see the Instructions for Schedule B (Form 1040 or 1040-SR) to determine the net amount of interest includible in income on the contract of the security of the security

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 Aof 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 with the Internal Revenue Service Center for your area. On Form 1096, list yourself as the "filer." A spouse is not required to file a nominee return to show amounts owned by the other spouse.

Future developments. For the latest information about developments related to Form 1099-INT and its instructions, such as legislation enacted after they were published. ao to <a href="https://www.irs.dov/Form1099INT">www.irs.dov/Form1099INT</a> and its instructions, such as legislation enacted after they were published. ao to <a href="https://www.irs.dov/Form1099INT">www.irs.dov/Form1099INT</a> and its instructions, such as

|   |               |                                 | CORRECTE                                  | D (if checked)                              |                             |                                 |   |  |  |
|---|---------------|---------------------------------|---|---|-----------------------------|---------------------------------|---|--|--|
|   |               |                                 | Payer's RTN (optional)  1 Interest income | _   | 0. 1545-0112<br>0 <b>20</b> | Interest<br>Income              |   |  |  |
|   |               |                                 | \$ 128.07                                 | Form  | 1099-INT                    |                                 |   |  |  |
|   |               |                                 | 2 Early withdrawal penalty                |   |                             |                                 |   |  |  |
|   |               |                                 |   | \$  | Copy B For Recipient        |                                 |   |  |  |
| PAYER'S TIN   |               | RECIPIENT'S TIN                 |   | 3 Interest on U.S. Savings Bonds            | and Treas                   | . obligations                   |   |  |  |
| 51-0020270  |               | XXX-XX-8751                     |   | \$  |                             |                                 |   |  |  |
| RECIPIENT'S name, street address (inc<br>and ZIP or foreign postal code | luding apt. r | o.), city or town, state or pro | vince, country,                           | 4 Federal income tax withheld               | 5 Inves                     | tment expenses                  | This is important ta information and i being furnished to the |  |  |
| VENKAT RAJEEV R MA  | LIPEDE        | )I                              |   | \$  | \$                          |                                 |   |  |  |
| 1445 BELL TRACE DR  |               |                                 |   | 6 Foreign tax paid                          | 7 Foreig                    | n country or U.S. possession    | IRS. If you are required to file a                            |  |  |
| ANTIOCH, TN 37013   |               |                                 |   | \$  |                             |                                 | return, a negligence penalty or other                         |  |  |
|   |               |                                 |   | 8 Tax-exempt interest                       | 9 Specifinteres             | ied private activity bond<br>st | sanction may be   |  |  |
|   |               |                                 | \$  | \$  | impo<br>t                   |                                 |   |  |  |
|   |               |                                 |   | 10 Market discount                          | <b>11</b> Bond              | premium                         | taxable and the IRS   |  |  |
|   |               |                                 | FATCA filing requirement                  |   | \$                          |                                 | determines that it has not been reported.                     |  |  |
|   |               |                                 | 12 Bond premium on Treasury obligations   | <b>13</b> Bond                              | oremium on tax-exempt bond  |                                 |   |  |  |
|   |               |                                 |   | \$  | \$                          | T                               |   |  |  |
| Account number (see instruction   | s) 700        | 5953379                         |   | 14 Tax-exempt and tax credit bond CUSIP no. | 15 State                    | 16 State identification no      | 17 State tax withheld   |  |  |
|   |               |                                 |   |   | TN                          |                                 | \$  |  |  |

Form 1099-INT

(keep for your records)

www.irs.gov/Form1099INT

Department of the Treasury - Internal Revenue Service

| ITEM                          | GROUP | ACCOUNT NAME TERM | ACCOUNT NUMBER | AMOUNT | DESCRIPTION |
|-------------------------------|-------|-------------------|----------------|--------|-------------|
| BOX 1 (INTEREST NOT IN BOX 3) |       | ONLINE SAVING     | 7005953379     | 128.07 |             |



#### IRS Form 1099-INT

## Frequently Asked Questions and Answers

## Why did I receive IRS Form 1099-INT?

IRS Form 1099-INT reports combined interest paid on all of your non-IRA Discover Bank deposit accounts. You are receiving this form because you received \$10 or more in interest for all of your non-IRA deposit accounts combined.

## Why is the promotional bonus deposited into my account included on my IRS Form 1099-INT?

Cash bonuses may be considered taxable income by the IRS. If the bonus meets or exceeds \$10, it must be reported on IRS Form 1099-INT.

## What is federal income tax withheld?

Income tax withheld is tax on reportable income that Discover Bank withholds and pays to the IRS. We will withhold tax if an Account Owner requests withholding or if we are required to withhold by the IRS. If we are required to withhold by the IRS, we withhold at a rate of 24%.

## Where can I find a breakdown of interest for each of my deposit accounts?

The reverse side of IRS Form 1099-INT will list each of your deposit accounts and provides the interest for each of your accounts.

## Why do I have to claim interest for a Certificate of Deposit if I did not take a withdrawal?

Interest paid is considered income regardless of whether or not you have withdrawn it from your Certificate of Deposit.

## When can I view my IRS Form 1099-INT online?

A banner on DiscoverBank.com will let you know as soon as your tax form is available online. You will then be able to view and download your tax form by clicking *Statements* and then clicking *Tax Forms* from the home page. Customers who are Account Center registered will also receive an email notice when tax forms are available online.