


EX-04 Davenport Documents

Driver's License (Tax Training Only)

License No. 20200901193946
Name and Address
MICHAEL E DAVENPORT
167 HOLLAND AVE
SEASIDE PARK, NJ 08752



Birth Date 12/25/1949
Issue Date 12/05/2020 Expiration Date 12/05/2025

Social Security

014-00-XXXX

THIS NUMBER HAS BEEN ESTABLISHED FOR

MICHAEL E DAVENPORT

For Tax Training Purposes Only

Social Security

214-00-XXXX

THIS NUMBER HAS BEEN ESTABLISHED FOR

SOPHIA DAVENPORT

For Tax Training Purposes Only

Prior Year Return Information

1. Federal and NJ returns prepared by paid preparer
2. Federal 1040:
 - a. They did itemize and take a property tax deduction.
 - b. 2018 1040 Schedule 1 line 13 is -3,000. Looking into the return you find a copy of a "Capital Loss Carryover Worksheet," and you see that (Short-term capital loss carryover) from 2018 is \$1,309.
3. 2018 Federal 1040 values
 - a. Line 2a (tax exempt interest) = 100
 - b. Line 4a (gross IRA, pensions & annuities) = 53,300
 - c. Line 4b (taxable IRA, pensions and annuities) = 47,295
 - d. Line 5a (gross Social Security) = 21,300
 - e. Line 5b (taxable Social Security) = 18,105
 - f. Line 7 (Adjusted Gross Income) = 65,400
 - g. Line 10 (taxable Income) = 48,200.
4. 2018 Federal Schedule A Values
 - a. Line 5a (State Income taxes) = 975 (State income tax was used)
 - b. Line 5b (real estate tax) = 7,000
 - c. Line 17 (itemized deductions) = 28,500
5. NJ-1040:
 - a. Refund of \$467

Information from prior year PTR-2

Shared ownership: No

Multiple units: No

PTR rebate: \$1,150

PTR base tax: \$5,000

Block: 2345, Lot: 7, Qual: n/a

EX-04 Davenport Documents

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT																																		
<div style="display: flex; align-items: center;"> <div style="font-size: 24pt; font-weight: bold; margin-right: 10px;">2019</div> <div> <input type="checkbox"/> PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME. <input type="checkbox"/> SEE THE REVERSE FOR MORE INFORMATION. </div> </div>																																		
Box 1. Name MICHAEL E DAVENPORT		Box 2. Beneficiary's Social Security 014-00-XXXX																																
Box 3. Benefits Paid in 2019 <div style="text-align: right; font-weight: bold;">\$13,650.00</div>	Box 4. Benefits Repaid to SSA in 2019	Box 5. Net Benefits Paid for 2019 (Box 3 minus Box 4) <div style="text-align: right; font-weight: bold;">\$13,650.00</div>																																
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Form **SSA-1099-SM**

EX-04 Davenport Documents

FORM SSA-1099 - SOCIAL SECURITY BENEFIT STATEMENT		
2019 <input type="checkbox"/> PART OF YOUR SOCIAL SECURITY BENEFITS SHOWN IN BOX 5 MAY BE TAXABLE INCOME. <input type="checkbox"/> SEE THE REVERSE FOR MORE INFORMATION.		
Box 1. Name SOPHIA DAVENPORT		Box 2. Beneficiary's Social Security 214-00-XXXX
Box 3. Benefits Paid in 2019 \$9,650.00	Box 4. Benefits Repaid to SSA in 2019	Box 5. Net Benefits Paid for 2019 (Box 3 minus Box 4) \$9,650.00
DESCRIPTION OF AMOUNT IN BOX 3		DESCRIPTION OF AMOUNT IN BOX 4
Paid by check or direct deposit \$8,042.00		
Medicare Part B premiums deducted from your benefits \$1,608.00		
Medicare Prescription Drug premiums (Part D) deducted from your benefits \$.00		
Total Additions \$9,650.00		
Benefits for 2019 \$9,650.00		Box 6. Voluntary Federal Income Tax Withheld
Benefits for 2018 Benefits for 2017 Benefits for 2016		Box 7. Address SOPHIA DAVENPORT 167 HOLLAND AVE SEASIDE PAK, NJ 08752
		Box 8. Claim Number (use this number if you need to contact SSA) 214-00-XXXXA

Form **SSA-1099-SM**

EX-04 Davenport Documents

<input type="checkbox"/> CORRECTED (if checked)				2019 Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.			
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. DEFENSE FINANCE AND ACCOUNTING SERVICE US MILITARY RETIRED PAY 8899 E 56TH STREET INDIANAPOLIS, IN 46249			1 Gross distribution \$13,567.00						
			2a Taxable amount \$13,567.00						
PAYER'S TIN 34-0727612			RECIPIENT'S TIN 014-00-XXXX		2b Taxable amount not determined. <input type="checkbox"/> Total Distribution <input type="checkbox"/>		Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the IRS		
			3 Capital gain (included in box 2a).		4 Federal income tax withheld \$1,390.00				
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal MICHAEL E DAVENPORT 167 HOLLAND AVE SEASIDE PARK, NJ 08752			5 Employee contributions/ Designated Roth contributions or	6 Net unrealized appreciation in employer's securities					
			7 Distribution Code(s) 7	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other %				
			9a Your percentage of total distribution %	9b Total Employee Contributions					
10 Amount allocable to IRR within 5 years	11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>	12 State tax withheld		13 State/Payer's state no.		14 State distribution		
Account number (see instructions)		Date of payment	15 Local tax withheld		16 Name of locality		17 Local distribution		
Form 1099-R									

EX-04 Davenport Documents

<input type="checkbox"/> CORRECTED (if checked)			<div style="font-size: 2em; font-weight: bold;">2019</div> Form 1099-R		Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.			
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. CALVERT COUNTY SHERIFF'S DEPARTMENT 18 COUNTY RD 16 TOMS RIVER, NJ 08753			1 Gross distribution <div style="text-align: right; font-weight: bold;">\$42,670.00</div>	Copy B Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return. This information is being furnished to the IRS				
			2a Taxable amount			Total Distribution <input type="checkbox"/>		
			2b Taxable amount not determined. <input checked="" type="checkbox"/>			4 Federal income tax withheld <div style="text-align: right; font-weight: bold;">\$3,500.00</div>		
PAYER'S TIN <div style="text-align: center; font-weight: bold;">87-6005678</div>		RECIPIENT'S TIN <div style="text-align: center; font-weight: bold;">014-00-XXXX</div>		5 Employee contributions/ Designated Roth contributions or <div style="text-align: right; font-weight: bold;">\$1,500.00</div>		6 Net unrealized appreciation in employer's securities		
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal MICHAEL E DAVENPORT 167 HOLLAND AVE SEASIDE PARK, 08752			7 Distribution Code(s) <div style="text-align: center; font-size: 1.2em;">7</div>	IRA/ SEP/ SIMPLE <input type="checkbox"/>	8 Other <div style="text-align: right;">%</div>			
			9a Your percentage of total distribution <div style="text-align: center;">%</div>		9b Total Employee Contributions <div style="text-align: right; font-weight: bold;">\$110,650.00</div>			
			10 Amount allocable to IRR within 5 years		11 1st year of desig. Roth contrib.	FATCA filing requirement <input type="checkbox"/>		
14 State distribution <div style="text-align: right; font-weight: bold;">\$42,670.00</div>		15 Local tax withheld		16 Name of locality		17 Local distribution		
Account number (see instructions)			Date of payment					
Form 1099-R								

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<input type="checkbox"/> CORRECTED (if checked)					
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. JERRY'S HONEY JAR 142 COUNTY ROAD 16 SEASIDE PARK, NJ 08752		1 Rents \$700.00	OMB No. 1545-0115 <div style="font-size: 2em; font-weight: bold;">2019</div> Form 1099-MISC		Miscellaneous Income Copy B For Recipient
		2 Royalties			
		3 Other Income	4 Federal income tax withheld		
PAYER'S TIN 44-5003215	RECIPIENT'S TIN 014-00-XXXX	5 Fishing boat proceeds	6 Medical and health care payments		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, ZIP or foreign postal code MICHAEL E. DAVENPORT 167 HOLLAND AVE. SEASIDE PARK, NJ 08752		7 Nonemployee Compensation	8 Substitute payments in lieu of dividends or interest		
		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale > <input type="checkbox"/>	10 Crop Insurance proceeds		
		11	12		
Account number (see instructions)	FATCA filing requirement <input type="checkbox"/>	13 Excess golden parachute payments	14 Gross proceeds paid to an attorney		
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income	
Form 1099-MISC					

EX-04 Davenport Documents

<input type="checkbox"/> CORRECTED			
PAYER'S name Street address City or town, state or province, country, ZIP or foreign postal code Telephone no. LINCOLN INVESTMENT SERVICES 197 ESSEX AVE JACKSONVILLE, FL 32209		Applicable Check Box on Form 8949 1a Description of Property (Example 100 sh. XYZ Co.) 25 SHARES OF IBM	OMB No. 1545-0715 <div style="text-align: center; font-size: 24pt; font-weight: bold;">2019</div> Form 1099-B
PAYER'S TIN 89-6002540		RECIPIENT'S TIN 014-00-XXXX	
RECIPIENT'S name Street address (including apt.no.) City or town, state or province, country, ZIP or foreign postal code MICHAEL E DAVENPORT 167 HOLLAND AVE SEASIDE PARK, NJ 08752		1b Date acquired 1d Proceeds \$3,569.00	1c Date sold or disposed 08/19/2019 1e Cost or other basis
Account number (see instructions) 4958672		1f Accrued Market Discount	1g Wash sale loss disallowed
CUSIP number		FATCA filing requirement <input type="checkbox"/>	
14 State Name	15 State identification no.	16 State tax withheld	
10 Unrealized profit or (loss) on open contracts - 12/31/2019		11 Aggregate profit or (loss) on contracts	
12 If checked, basis reported to IRS <input type="checkbox"/>		13 Bartering	
Form 1099-B			

Copy B
For Recipient

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

EX-04 Davenport Documents

SONIC BROKERAGE SERVICES LLC
 P.O. Box 1234
 Albuquerque, NM 87125-8019

2019 TAX REPORTING STATEMENT

Account No. S12-123456 Customer Service: 800-555-1212
 Recipient ID No. 014-**-**** Payer's Fed ID Number: 04-3-****

MICHAEL & SOPHIA DAVENPORT
 167 HOLLAND AVENUE
 YOUR CITY, YOUR STATE, YOUR ZIP

Payer's Name and Address:
 STATE SERVICES LLC
 123 IRVING BLVD
 JERSEY CITY, NJ 07310

1a....270.4
 1b....167.83
 2a....3,512.09

Form 1099-DIV * 2019 Dividends and Distributions		Copy B for Recipient (OMB No. 1545-0110)	
1a Total Ordinary Dividends	270.40	7 Foreign Tax Paid	0.00
1b Qualified Dividends	167.83	8 Foreign Country or U.S. Possession	0.00
2a Total Capital Gain Distributions	3,512.09	9 Cash Liquidation Distributions	0.00
2b Unrecap. Sec 1250 Gain	0.00	10 Non-Cash Liquidation Distributions	0.00
2c Section 1202 Gain	0.00	11 Exempt Interest Distributions	0.00
2d Collectibles (28%) Gain	0.00	12 Specified Private Activity Bond Interest Dividends	0.00
3 Nondividend Distributions	0.00	13 State	
4 Federal Income Tax Withheld	0.00	14 State Identification No.	
5 Section 199A Dividends	0.00	15 State Tax Withheld	0.00
6 Investment Expenses	0.00		

Form 1099-INT * 2019 Interest Income		Copy B for Recipient (OMB No. 1545-0112)	
1 Interest Income	43.13	10 Market Discount	0.00
2 Early Withdrawal Penalty	0.00	11 Bond Premium	0.00
3 Interest on U.S. Savings Bonds and Treas. Obligations	0.00	12 Bond Premium on U.S. Treasury Obligations	0.00
4 Federal Income Tax Withheld	0.00	13 Bond Premium on Tax-Exempt Bond	0.00
5 Investment Expenses	0.00	14 Tax-Exempt Bond CUSIP no.	
6 Foreign Tax Paid	0.00	15 State	
7 Foreign Country or U.S. Possession	0.00	16 State Identification No.	
8 Tax-Exempt Interest	0.00	17 State Tax Withheld	0.00
9 Specified Private Activity Bond Interest	0.00		

1....43.13

* 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.

EX-04 Davenport Documents

2019 TAX REPORTING STATEMENT

MICHAEL & SOPHIA DAVENPORT

Account No. **S12-123456** Customer Service: 800-555-1212
 Recipient ID No. **014-**-****** Payer's Fed ID Number: 04-3****

Form 1099-MISC * 2019 Miscellaneous Income Copy B for Recipient (OMB No. 1545-0115)

2 Royalties	0.00	16 State Tax Withheld	0.00
3 Other income	0.00	17 State/Payer's State No.	
4 Federal Income Tax Withheld	0.00	18 State Income	0.00
8 Substitute Payments in Lieu of Dividends or Interest	0.00		

Summary of 2019 Original Issue Discount

Total Original Issue Discount	0.00	Total Original Issue Discount - REMIC	0.00
Total Original Issue Discount on U.S. Treasury Obligations	0.00		
Total Original Issue Discount on Tax-Exempt Obligations	0.00		

Original Issue Discount (OID) amounts are reported individually to the IRS. Refer to the Form 1099-OID pages in this statement, if applicable.

Summary of 2019 Proceeds From Broker and Barter Exchange Transactions

1099-B Section	Total Proceeds	Total Cost Basis	Total Market Discount	Total Wash Sales	Realized Gain/Loss	Federal Income Tax Withheld
Short-term transactions for which basis is <u>reported</u> to the IRS	41,200.06	52,482.02	0.00	0.00	-11,281.96	0.00
Short-term transactions for which basis is <u>not reported</u> to the IRS	0.00	0.00	0.00	0.00	0.00	0.00
Long-term transactions for which basis is <u>reported</u> to the IRS	26,327.32	23,771.86	0.00	0.00	2,555.46	0.00
Long-term transactions for which basis is <u>not reported</u> to the IRS	0.00	0.00	0.00	0.00	0.00	0.00
Transactions for which basis is not reported to the IRS and Term is Unknown	0.00	0.00	0.00	0.00	0.00	0.00
	67,527.38	76,253.88	0.00	0.00	-8,726.50	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.

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2019 TAX REPORTING STATEMENT

MICHAEL & SOPHIA DAVENPORT

Account No. **S12-123456** Customer Service: 800-555-1212
 Recipient ID No. **014-**-****** Payer's Fed ID Number: 04-3****

Summary of 2019 Supplemental Information Not Reported to the IRS

Margin Interest Paid	0.00	Currency Realized Gain/Loss (USD)	0.00
Tax Exempt Investment Expense	0.00	Actual Payment Shortfall	0.00
Accrued Interest Paid on Purchases	0.00	Addition to Basis	0.00
Proceeds Investment Expenses	0.00	Account Fees	0.00
Severance Tax	0.00	Short Dividends	0.00
Administrative Expenses	0.00	Money Market Realized Gain/Loss	0.00
Non-deductible Generic Expenses	0.00	Short/Long Term Realized Gain/Loss	0.00
Deductible Generic Expenses	0.00	Mortgage Pool Statement (MBS)	0.00

EX-04 Davenport Documents

2019 TAX REPORTING STATEMENT

MICHAEL & SOPHIA DAVENPORT

Account No. **S12-123456** Customer Service: 800-555-1212
 Recipient ID No. **014-**-****** Payer's Fed ID Number: 04-3*****

FORM 1099-B*

2019 Proceeds from Broker and Barter Exchange Transactions

Copy B for Recipient OMB No. 1545-0715

Short-term transactions for which basis **is reported to the IRS** --report on Form 8949 with Box A checked and/or Schedule D, Part I
 Proceeds are reported as **gross proceeds** unless otherwise indicated (a). (This Label is a Substitute for Boxes 2, 3, 5 & 6)

(IRS Form 1099-B box numbers are shown below in bold type)

1a Description of property, Stock or Other Symbol, CUSIP										
Action	Quantity	1b Date Acquired	1c Date Sold or Disposed	1d Proceeds	1e Cost or Other Basis (b)	1f Accrued Market Discount	1g Wash Sale Loss Disallowed	Gain/Loss (-)	4 Federal Income Tax Withheld	14 State Tax Withheld
SONIC ENERGY, SSENX, 316391234										
Sale	513.136	05/14/19	11/12/19	20,535.70	25,000.00			-4,464.30		
SONIC TECHNOLOGY, SSTEX, 316391235										
Sale	2.737	04/09/18	02/15/19	125.63	114.14			11.49		
Sale	32.876	12/14/18	02/15/19	1,509.01	1,467.88			41.13		
Subtotals				1,634.64	1,582.02					
GO GETTER FUND, GGTX, 98765432										
Sale	258.258	09/21/19	11/21/19	19,029.72	25,900.00			-6,870.28		
TOTALS				41,200.06	52,482.02	0.00	0.00		0.00	
								52.62		
								-11,334.58		

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EX-04 Davenport Documents

2019 TAX REPORTING STATEMENT

MICHAEL & SOPHIA DAVENPORT

Account No. 812-123456 Customer Service: 800-555-1212
 Recipient ID No. 014-**-**** Payer's Fed ID Number: 04-3**

FORM 1099-B*

2019 Proceeds from Broker and Barter Exchange Transactions

Copy B for Recipient OMB No. 1545-0715

Long-term transactions for which basis is reported to the IRS --report on Form 8949 with Box D checked and/or Schedule D, Part II
 Proceeds are reported as **gross proceeds** unless otherwise indicated (a). (This Label is a Substitute for Boxes 2, 3, 5 & 6)

(IRS Form 1099-B box numbers are shown below in bold type)

1a Description of property, Stock or Other Symbol, CUSIP	Quantity	1b Date Acquired	1c Date Sold or Disposed	1d Proceeds	1e Cost or Other Basis (b)	1f Accrued Market Discount	1g Wash Sale Loss Disallowed	Gain/Loss (-)	4 Federal Income Tax Withheld	14 State Tax Withheld
GO GETTER FUND, GGTIX, 98765432										
Sale	548.232	07/25/16	02/15/19	25,072.05	22,683.16			2,408.89		
Sale	27.348	08/03/16	02/15/19	1,255.27	1,108.70			146.57		
Subtotals				26,327.32	23,771.86					
TOTALS				26,327.32	23,771.86	0.00	0.00	2,555.46	0.00	
								Box D Long-Term Realized Gain		
								Box D Long-Term Realized Loss		0.00

For any transaction listed on Form 1099-B in a section indicating that "**basis is reported to the IRS**", we are reporting to the IRS: 1a Description of Property, 2 type of gain or loss (i.e. short-term or long-term), 3 basis reported to IRS, 6 Gross or Net Proceeds, and columns 1b, 1c, 1d, 1e, 1f, 1g, 4, 7, 14, 15 and 16. We are not reporting to the IRS: the Action, the Gain/Loss, and all subtotals and totals.

For any section 1256 option contracts we are reporting to the IRS: 1a Description of Property and totals for boxes 8, 9, 10 and 11.

For any transaction listed on Form 1099-B in a section indicating that "**basis is not reported to the IRS**", we are reporting to the IRS: 1a Description of Property, 5 Noncovered security, 6 Gross or Net Proceeds, and columns 1c, 1d, 4, 14, 15 and 16. We are not reporting to the IRS: 2 type of gain or loss (i.e. short-term or long-term), the Action, the Gain/Loss, columns 1b, 1e, 1f, 1g, 2, 3 and 7 and all subtotals and totals.

Although Sonic makes every effort to provide accurate information, please bear in mind that you, the taxpayer, are ultimately responsible for the accuracy of your tax returns.

(b) Cost or other basis provided may include adjustments including, but not limited to, dividend reinvestment, return of capital/principal, wash sale loss disallowed, amortization, accretion, acquisition premium, bond premium, market discount, market premium, and option premium.

Amortization, accretion, and similar adjustments to cost basis are not provided for short-term instruments and unit investment trusts.

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EX-04 Davenport Documents

2019 SUPPLEMENTAL INFORMATION

MICHAEL & SOPHIA DAVENPORT Account No. **S12-123456** Customer Service: **800-555-1212**
 Recipient ID No. **014-**-****** Payer's Fed ID Number: **04-3******

Note: This information is not reported to the IRS. It may assist you in tax return preparation.

Details of 1099-DIV Transactions

Total Ordinary Dividends and Distributions Detail

Description, Symbol, CUSIP								
Date	1a Total Ordinary Dividends (includes 1b and 5)	Dividend Distributions	Short-Term Capital Gains	1b Qualified Dividends	5 Section 199A Dividends	11 Exempt Interest Dividends	12 Specified Private Activity Bond Interest Dividends	7 Foreign Tax Paid
GLOBAL GROWTH CL A, GGAIX, 123456789								
12/06/19	270.40		102.57	167.83				
TOTALS	270.40	0.00	102.57	167.83	0.00	0.00	0.00	0.00

Short-term capital gain distributions reported on monthly/quarterly account statements are included in 1a Total Ordinary Dividends on Form 1099-DIV.

To see the 2019 State Percentages of Tax-Exempt Income for Sonic Federal Tax-Exempt Funds or the Percentage of Income from U.S. Government Securities for applicable Sonic Funds, visit Sonic.com/fundtaxinfo.

Total Capital Gains Distributions Detail

Description, Symbol, CUSIP					
Date	2a Total Capital Gain Distr. (m)	Capital Gain Distributions Subject to Applicable Rate (m)	2b Unrecaptured Section 1250 Gain	2c Section 1202 Gain	2d Collectibles (28%) Gain
SONIC PORT A, SONIX, 23456789					
09/13/19		1,055.99	1,055.99		
12/06/19		662.06	662.06		
Subtotals		1,718.05	1,718.05		

GLOBAL GROWTH CL A, GGAIX, 123456789					
12/06/19		1,794.04	1,794.04		
TOTALS		3,512.09	3,512.09	0.00	0.00

(m) 2a Total Capital Gain includes 2b, 2c and 2d. The portion of Capital Gain Distributions is subject to Applicable Rate.

EX-04 Davenport Documents

2019 SUPPLEMENTAL INFORMATION

MICHAEL & SOPHIA DAVENPORT

Account No. S12-123456 Customer Service: 800-555-1212

Recipient ID No. 014-**-**** Payer's Fed ID Number: 04-3**

Note: This information is not reported to the IRS. It may assist you in tax return preparation.

Details of 1099-INT Transactions

Interest Income Details, Taxable Obligations

Description, Symbol, CUSIP	1 Interest Income	6 Foreign Tax Paid	11 Bond Premium	Noncovered Bond Premium	10 Market Discount	Noncovered Market Discount
CASH, SCASH, 345678912						
01/31/19	2.65					
02/28/19	3.29					
03/29/19	6.59					
04/30/19	8.11					
05/31/19	6.30					
06/28/19	3.90					
07/31/19	0.22					
08/30/19	0.22					
09/30/19	0.22					
10/31/19	0.26					
11/29/19	2.68					
12/31/19	8.67					
Subtotals	43.13					
TOTALS	43.13	0.00	0.00	0.00	0.00	0.00

Important Tax Return Document Enclosed.

Pages 7 of 7

EX-04 Davenport Documents

<p>Schedule K - 1 (Form 1065)</p> <p>Department of the Treasury Internal Revenue Service</p>	<h1 style="font-size: 2em; margin: 0;">2019</h1>	<input checked="" type="checkbox"/> Final K-1 <input type="checkbox"/> Amended K-1	<p>Part III Partner's Share of Current Year Income, Deductions, Credits, and Other Income</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">1</td> <td style="width: 70%;">Ordinary business income (loss)</td> <td style="width: 5%; text-align: center;">15</td> <td style="width: 15%;">Credits</td> </tr> <tr> <td style="text-align: center;">2</td> <td>Net rental real estate income (loss)</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td>Other net rental income (loss)</td> <td style="text-align: center;">16</td> <td>Foreign transactions</td> </tr> <tr> <td style="text-align: center;">4</td> <td>Guaranteed payments</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">5</td> <td>Interest income</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">6a</td> <td>Ordinary dividends \$87.15</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">6b</td> <td>Qualified dividends \$45.63</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">7</td> <td>Royalties</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">8</td> <td>Net short-term capital gain (loss)</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">9a</td> <td>Net long-term capital gain (loss) \$1,045.39</td> <td style="text-align: center;">17</td> <td>Alternative minimum tax (AMT) items</td> </tr> <tr> <td style="text-align: center;">9b</td> <td>Collectibles (28%) gain (loss)</td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">9c</td> <td>Unrecaptured section 1250 gain</td> <td></td> <td></td> </tr> </table>	1	Ordinary business income (loss)	15	Credits	2	Net rental real estate income (loss)			3	Other net rental income (loss)	16	Foreign transactions	4	Guaranteed payments			5	Interest income			6a	Ordinary dividends \$87.15			6b	Qualified dividends \$45.63			7	Royalties			8	Net short-term capital gain (loss)			9a	Net long-term capital gain (loss) \$1,045.39	17	Alternative minimum tax (AMT) items	9b	Collectibles (28%) gain (loss)			9c	Unrecaptured section 1250 gain		
1	Ordinary business income (loss)	15	Credits																																																
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<p>Partner's Share of Income, Deductions, Credits, etc. > See back of form and separate instructions.</p>																																																			
<p>Part I Information About the Partnership</p>																																																			
<p>A Partnership's employer identification number 76-5000236</p>																																																			
<p>B Partnership's name, address, city, state, and ZIP code ACME HOLDINGS PO BOX 1267 BOSTON, MA 02110</p>																																																			
<p>C IRS Center where partnership filed return</p>																																																			
<p>D <input type="checkbox"/> Check if this is a publically traded partnership (PTP)</p>																																																			
<p>Part II Information About the Partner</p>																																																			
<p>E Partner's identifying number 214-00-XXXX</p>																																																			
<p>F Partner's name, address, city, state, and ZIP code SOPHIA DAVENPORT 167 HOLLAND AVE SEASIDE PARK, NJ 08752</p>																																																			
<p>There are typically more fields in an actual K-1 than those displayed in this example. If values for items other than interest, dividends, capital gain distribution, or royalties are included within lines on a K-1, the tax return would be considered out of scope.</p>																																																			

EX-04 Davenport Documents

Medical and dental expenses

Doctors: \$1,789.00
 Dental insurance: \$1,616.00
 Dental crowns: \$2,178.34
 Prescriptions: \$1795.57
 Medical miles: 1,843

Ambulance \$960.70
 Hospital..... \$3,790.23
 Insulin..... \$980.00
 Hearing aids \$3,194.90

Taxes paid

Property tax on main house: (see 1098)
 Property tax on a parcel of land: \$450.00
 Mortgage Interest (see 1098)
 Use Zip Code 08752 for sales tax

Gifts to Charity

St Peter's Church: \$2,600.00
 Mayo Clinic: \$1,000.00
 American Red Cross: \$500.00
 Goodwill (clothing/household) \$418.00

Chamber of Commerce..... \$75.00
 Republican National Party\$50.00
 AARP Foundation..... \$100.00

Miscellaneous Deductions

Safe deposit box: \$300.00
 Investment fees: \$1,978.00
 Tax return preparation: \$675.00

<input type="checkbox"/> CORRECTED (if checked)				2019		Mortgage Interest Statement	
RECIPIENT'S/LENDER'S name, street address, city or town, state or province, country, ZIP or foreign postal code and telephone no.		* 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.		Form 1098		Copy B For Payer/Borrower The information in boxes 1 through 9 is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points, reported in boxes 1 and 6; or because you didn't report the refund of interest (box 4); or because you claimed a non-deductible item.	
US BANK NATIONAL ASSOCIATION 4801 FREERICA ST. OWENSBORO, KY 42301				1. Mortgage interest received from payer(s)/borrower(s) * \$9,698.50			
RECIPIENT'S/LENDER'S TIN	PAYER'S/BORROWER'S TIN	2. Outstanding mortgage principal as of 1/1/2019	3. Mortgage origination date				
31-0841368	014-00-XXXX	\$289,678.35	03/12/2011				
PAYER'S/BORROWER'S name, street address, city or town, state or province, country, ZIP or foreign postal code and telephone no.		4. Refund of overpaid interest	5. Mortgage insurance premiums				
MICHAEL & SOPHIA DAVENPORT 167 HOLLAMD AVE. SEASIDE PARK, NJ 08752		6. Points paid on purchase of principal residence					
9. Number of properties securing the mortgage		8. Address or description of property securing mortgage (see Instructions)		7. <input checked="" type="checkbox"/> If address of property securing mortgage is the same as PAYER'S/BORROWER'S address, the box is checked, or the address or description is entered in box 8.			
				10. Other PROPERTY TAX \$6,867			
Account number (see instructions)							
687209752							
Form 1098							