

Your first name and initial <b>Todd R</b>	Last name <b>Ryan</b>	Your social security number [REDACTED]
If a joint return, spouse's first name and initial	Last name	Spouse's social security number [REDACTED]
Home address (number and street). If you have a P.O. box, see instructions. [REDACTED]		Apt. no. [REDACTED]
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions). <b>Hillsboro, Oregon 97123</b>		Make sure the SSN(s) above are correct.
Foreign country name	Foreign province/state/country	Foreign postal code
<b>Income</b> 1 Wages, salaries, and tips. This should be shown in box 1 of your Form(s) W-2. Attach your Form(s) W-2. 2 Taxable interest. If the total is over \$1,500, you cannot use Form 1040EZ. 3 Unemployment compensation and Alaska Permanent Fund dividends (see instructions). 4 Add lines 1, 2, and 3. This is your adjusted gross income. 5 If someone can claim you (or your spouse if a joint return) as a dependent, check the applicable box(es) below and enter the amount from the worksheet on back. <input type="checkbox"/> You <input type="checkbox"/> Spouse If no one can claim you (or your spouse if a joint return), enter \$10,000 if single; \$20,000 if married filing jointly. See back for explanation. 6 Subtract line 5 from line 4. If line 3 is larger than line 4, enter -0. This is your taxable income. ► 6 0 00		
<b>Payments, Credits, and Tax</b> 7 Federal income tax withheld from Form(s) W-2 and 1099. 8a Earned Income credit (EIC) (see instructions). b Nontaxable combat pay election. 9 Add lines 7 and 8a. These are your total payments and credits. 10 Tax. Use the amount on line 6 above to find your tax in the tax table in the instructions. Then, enter the tax from the table on this line. ► 10 0 00		
<b>Refund</b> 11a If line 9 is larger than line 10, subtract line 10 from line 9. This is your refund. If Form 8888 is attached, check here ► <input type="checkbox"/> ► b Routing number [REDACTED] ► c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings ► d Account number [REDACTED]		
<b>Amount You Owe</b> 12 If line 10 is larger than line 9, subtract line 9 from line 10. This is the amount you owe. For details on how to pay, see instructions. ► 12		
<b>Third Party Designee</b> Do you want to allow another person to discuss this return with the IRS (see instructions)? <input type="checkbox"/> Yes. Complete below. <input checked="" type="checkbox"/> No Designee's name ► Phone no. ► Personal identification number (PIN) ► [REDACTED]		
<b>Sign Here</b> Under penalties of perjury, I declare that I have examined this return and, to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge. Your signature [REDACTED] Date 3-23-14 Your occupation Sales Daytime phone number [REDACTED] Spouse's signature. If a joint return, both must sign. Date [REDACTED] Spouse's occupation [REDACTED] If the IRS sent you an Identity Protection PIN, enter it here (see inst.) [REDACTED]		
<b>Paid Preparer Use Only</b> Print/Type preparer's name Preparer's signature Date Check <input type="checkbox"/> if self-employed PTIN Firm's name ► Firm's EIN ► Firm's address ► Phone no.		

CORRECTED (if checked)

PAYER'S name, street address, city, state, ZIP code, and telephone no.  Oregon Employment Department 875 Union St NE Salem, OR 97311 (503) 947-1320		RECIPIENT'S Identification number  ***  1 Unemployment compensation  \$ 8,908.00	OMB No. 1545-0120  <b>2013</b> Form 1099-G	Certain Government Payments  Copy B For Recipient
PAYER'S federal identification number  93-6001789		2 State or local income tax refunds, credits, or offsets  \$	3 Box 2 amount is for tax year  4 Federal income tax withheld  \$ 0.00	
RECIPIENT'S name and Street address  TODD R RYAN HILLSBORO OR 97123-4504		5 ATAA/RTAA payments  \$ 0.00	6 Taxable grants  \$	
		7 Agriculture payments  \$	8 Box 2 is trade or business income  <input type="checkbox"/>	
		9 Market gain  \$	10-01 Benefits repaid  \$ 0.00	
		10a State OR	10b State ID no. 0972779	11 State income tax withheld  \$ 527.00

**Form 4852**

(Rev. August 2013)

Department of the Treasury  
Internal Revenue Service**Substitute for Form W-2, Wage and Tax Statement, or Form  
1099-R, Distributions From Pensions, Annuities, Retirement or  
Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**

OMB No. 1545-0074

► Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

► Information about Form 4852 is available at [www.irs.gov/form4852](http://www.irs.gov/form4852).**1 Name(s) shown on return**

Todd Russell Ryan

**2 Your social security number****3 Address**

Hillsboro, Oregon 97123

**4 Enter year in space provided and check one box. For the tax year ending December 31, 2013,**I have been unable to obtain (or have received an incorrect)  Form W-2 OR  Form 1099-R.

I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

**5 Employer's or payer's name, address, and ZIP code**

Comcast Cable Holdings LLC, One Comcast Center, Philadelphia, PA 19103

84-1260157

**7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.**

a Wages, tips, and other compensation . . . . .	<input type="checkbox"/>	g State income tax withheld . . . . .	0
b Social security wages . . . . .	<input type="checkbox"/>	(Name of state) . . . . .	
c Medicare wages and tips . . . . .	<input type="checkbox"/>	h Local income tax withheld . . . . .	0
d Advance EIC payment . . . . .	<input type="checkbox"/>	(Name of locality) . . . . .	
e Social security tips . . . . .	<input type="checkbox"/>	i Social security tax withheld . . . . .	1166.05
f Federal income tax withheld . . . . .	<input type="checkbox"/>	j Medicare tax withheld . . . . .	272.71

**8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.**

a Gross distribution . . . . .	<input type="checkbox"/>	f Federal income tax withheld . . . . .	
b Taxable amount . . . . .	<input type="checkbox"/>	g State income tax withheld . . . . .	
c Taxable amount not determined . . . . .	<input type="checkbox"/>	h Local income tax withheld . . . . .	
d Total distribution . . . . .	<input type="checkbox"/>	i Employee contributions . . . . .	
e Capital gain (included in line 8b) . . . . .	<input type="checkbox"/>	j Distribution codes . . . . .	

**9 How did you determine the amounts on lines 7 and 8 above?**Erroneous W-2 provided by company**10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.****None****Sign  
Here**

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature ► 

Date ► 3-23-14

**4852**

Form (Rev. August 2013)

**Substitute for Form W-2, Wage and Tax Statement, or Form  
1099-R, Distributions From Pensions, Annuities, Retirement or  
Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

► Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

► Information about Form 4852 is available at [www.irs.gov/form4852](http://www.irs.gov/form4852).

1 Name(s) shown on return

2 Your social security number

Todd Russell Ryan

3 Address

Hillsboro, Oregon 97123

4 Enter year in space provided and check one box. For the tax year ending December 31, 2013,I have been unable to obtain (or have received an incorrect)  Form W-2 OR  Form 1099-R.

I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code

6 Employer's or payer's  
identification number (if known)

Great-Trust Company LLC, PO Box 173764 D253, Denver, CO 80217

84-1455663

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

- |   |  |
|---|--|
| a Wages, tips, and other compensation . . . . . | g State income tax withheld . . . . .    |
| b Social security wages . . . . .               | (Name of state) . . . . .                |
| c Medicare wages and tips . . . . .             | h Local income tax withheld . . . . .    |
| d Advance EIC payment . . . . .                 | (Name of locality) . . . . .             |
| e Social security tips . . . . .                | i Social security tax withheld . . . . . |
| f Federal income tax withheld . . . . .         | j Medicare tax withheld . . . . .        |

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

- |  |                          |   |       |
|--|--------------------------|---|-------|
| a Gross distribution . . . . .                 | 281.08                   | f Federal income tax withheld . . . . . | 56.22 |
| b Taxable amount . . . . .                     | <input type="checkbox"/> | g State income tax withheld . . . . .   | 22.49 |
| c Taxable amount not determined . . . . .      | <input type="checkbox"/> | h Local income tax withheld . . . . .   |       |
| d Total distribution . . . . .                 | <input type="checkbox"/> | i Employee contributions . . . . .      |       |
| e Capital gain (included in line 8b) . . . . . |                          | j Distribution codes . . . . .          |       |

9 How did you determine the amounts on lines 7 and 8 above?

Erroneous 1099-R provided by company

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

None

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

**Sign  
Here**

Signature ►

Date ► 3-23-14

**4852**

Form (Rev. August 2013)

**Substitute for Form W-2, Wage and Tax Statement, or Form 1099-R, Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc.**

OMB No. 1545-0074

Department of the Treasury  
Internal Revenue Service

► Attach to Form 1040, 1040A, 1040-EZ, or 1040X.

► Information about Form 4852 is available at [www.irs.gov/form-4852](http://www.irs.gov/form-4852).

1 Name(s) shown on return

Todd Russell Ryan

3 Address

Hillsboro, Oregon 97123

2 Your social security number

4 Enter year in space provided and check one box. For the tax year ending December 31, 2013.

I have been unable to obtain (or have received an incorrect)  Form W-2 OR  Form 1099-R.

I have notified the IRS of this fact. The amounts shown on line 7 or line 8 are my best estimates for all wages or payments made to me and tax withheld by my employer or payer named on line 5.

5 Employer's or payer's name, address, and ZIP code

CEC Employee Group LLC, 231 N Martingale Rd, Schaumburg, IL 60173

36-4302628

6 Employer's or payer's identification number (if known)

7 Form W-2. Enter wages, tips, other compensation, and taxes withheld.

a Wages, tips, and other compensation . . . . .	g State income tax withheld . . . . .	0
b Social security wages . . . . .	(Name of state) . . . . .	
c Medicare wages and tips . . . . .	h Local income tax withheld . . . . .	
d Advance EIC payment . . . . .	(Name of locality) . . . . .	
e Social security tips . . . . .	i Social security tax withheld . . . . .	876.64
f Federal income tax withheld . . . . .	j Medicare tax withheld . . . . .	205.02

8 Form 1099-R. Enter distributions from pensions, annuities, retirement/profit-sharing plans, IRAs, insurance contracts, etc.

a Gross distribution . . . . .	f Federal income tax withheld . . . . .
b Taxable amount . . . . .	g State income tax withheld . . . . .
c Taxable amount not determined . . . . .	h Local income tax withheld . . . . .
d Total distribution . . . . .	i Employee contributions . . . . .
e Capital gain (included in line 8b) . . . . .	j Distribution codes . . . . .

9 How did you determine the amounts on lines 7 and 8 above?

Company provided erroneous W-2

10 Explain your efforts to obtain Form W-2, Form 1099-R, or Form W-2c, Corrected Wage and Tax Statement.

None

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this statement, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature ►

Date ► 3-23-14

## Form 1099-MISC

 CORRECTED (if checked)

(keep for your records)

PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code, and telephone no.

SENDOUTCARDS  
1825 RESEARCH WAY  
SALT LAKE CITY UT 84119

(801) 463-3800

1 Rents

\$

2 Royalties

\$

3 Other income

\$

OMB No. 1545-0115

2013

Form 1099-MISC

## Miscellaneous Income

58-2099809  
Department of the Treasury — IRS

Copy B

For Recipient

PAYER'S federal identification number  
45-0516631

RECIPIENT'S name, address, country, and ZIP or foreign postal code

RYAN TODD

HILLSBORO OR 97123

5 Fishing boat proceeds

\$

6 Medical and health care payments

\$

7 Nonemployee compensation

\$ 0.00

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 

10 Crop insurance proceeds

\$

11 Foreign tax paid

\$

12 Foreign country or U.S. possession

\$

13 Excess golden parachute payments

\$

14 Gross proceeds paid to an attorney

\$

Account number (see instructions)

31774

15a Section 409A deferrals

\$

15b Section 409A Income

\$

16 State tax withheld

\$

17 State/Payer's state no.

\$

18 State income

\$

\$

3 BMISCB NTF2577379A BMISREC Copyright 2013 Greatland/Nelco - Forms Software Only

This corrected 1099 is to correct  
 bad payer data submitted to the IRS. This  
 information is true and correct.


 3-23-14



State of Oregon  
Department of Revenue  
955 Center St NE  
Salem OR 97301-2555  
F.E.I.N. 93-6001960

# Form 1099G

2013

Statement for  
Recipients of  
CERTAIN  
GOVERNMENT  
PAYMENTS  
Copy B  
for Recipient

**Important: This is not a bill or notice of an additional refund. Do not destroy. Keep with your tax records.**

Recipient's Identification Number	Refunds for Tax Year	Tidbit Self-employment Tax Refunds	Lane Transit District Self-employment Tax Refunds	State Income Tax Refunds	Total Tax Refunds
XXX-XX-XXXXX	2010			\$26.96	
XXX-XX-XXXXX					\$26.96

**Instructions to Recipient..**

This is important tax information and is being furnished to the Internal Revenue Service (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.

If you itemized deductions on your federal income tax return for the tax year shown above, retain this form for use in completing your 2013 federal income tax return. See your federal 1040 instruction booklet for more information.

This notice reports the refunds you were allowed during 2013 for the tax year shown above, including any kicker refund. If you were allowed a refund for more than one tax year during 2013, you will receive a separate notice for each year. An overpayment of income tax is considered to be a refund whether it was mailed to you, credited to estimated tax payments, applied to a balance of tax due for a prior year, applied against other debts owed to the State of Oregon or the IRS, contributed to one of the charitable agencies listed on the Oregon return that tax year, or donated to the state school fund.

Questions? [www.oregon.gov/dor](http://www.oregon.gov/dor) or phone: 503-378-4988 (Salem) or 1-800-356-4222 (toll-free from an Oregon prefix).

Asistencia en español: 503-378-4988 (Salem) o 1-800-356-4222 (gratis de prefijo de Oregon).

TTY (hearing or speech impaired only): 503-945-8617 (Salem) or 1-800-886-7204 (toll-free from an Oregon prefix).