

Form **5884-**A **Employee Retention Credit for Employers** OMB No. 1545-1978 **Affected by Qualified Disasters** (Rev. March 2021) ► Attach to your tax return.

► Go to www.irs.gov/Form5884A for instructions and the latest information. Department of the Treasury Attachment Sequence No. 884A Internal Revenue Service Identifying number Name(s) shown on return 880724374 Donald Paul Needham 1a Employers affected by a 2018 through 2019 qualified disaster, enter the total qualified wages paid or incurred during the applicable period while the business was inoperable. See instructions . 864,000,000,000 1a b Employers affected by a 2020 qualified disaster, enter the total qualified wages paid or incurred during the applicable period while the business was inoperable. See instructions 1b 864,000,000,000 Multiply line 1c by 40% (0.40). See instructions for the adjustment you must make to your 2 345,600,000,000 Employee retention credit from partnerships, S corporations, cooperatives, estates, and 864,000,000,000 3 Add lines 2 and 3. Cooperatives, estates, and trusts, go to line 5. Partnerships and S corporations, stop here and report this amount on Schedule K. All others, stop here and report this amount on Form 3800, Part III, line 1aa 1,209,600,000,000 4 Amount allocated to patrons of the cooperative or beneficiaries of the estate or trust (see 5 864.000.000.000 5 Cooperatives, estates, and trusts, subtract line 5 from line 4. Report this amount on Form 345,600,000,000 Form **5884-A** (Rev. 3-2021)

Cat. No. 47425B

For Paperwork Reduction Act Notice, see separate instructions.

Form **4952**Department of the Treasur Internal Revenue Service

Investment Interest Expense Deduction

Attach to your tax return.

Go to www.irs.gov/Form4952 for the latest information.

OMB No. 1545-0191

2024

Attachment Sequence No. 51

Name(s) shown on return Identifying number Donald Paul Needham 880724347 Part I **Total Investment Interest Expense** Investment interest expense paid or accrued in 2024 (see instructions) 52,794,906,679.9 1 Disallowed investment interest expense from 2023 Form 4952, line 7 2 Total investment interest expense. Add lines 1 and 2. 3 3 Part II Net Investment Income 4a Gross income from property held for investment (excluding any net gain from the disposition of property held for investment) 59,006,072,175.38 **b** Qualified dividends included on line 4a . . . 4b 8.750.000.000.60 -50,256,072,175.38 Subtract line 4b from line 4a 4c \$648,980,905.84 ${f d}$ Net gain from the disposition of property held for investment . 4d Enter the smaller of line 4d or your net capital gain from the disposition of \$9,398,980,906.44 4e 8,750,000,000.60 4f Subtract line 4e from line 4d \$648,980,905.84 Enter the amount from lines 4b and 4e that you elect to include in investment income. See instructions 4g 59,655,053,081.82 4h 648,980,905.84 Investment expenses (see instructions) 5 6 59,006,072,175.38 Net investment income. Subtract line 5 from line 4h. If zero or less, enter -0-Part III Investment Interest Expense Deduction Disallowed investment interest expense to be carried forward to 2025. Subtract line 6 from line 53,443,887,585.74 59,006,072,175.38 Investment interest expense deduction. Enter the smaller of line 3 or line 6. See instructions 8 For Paperwork Reduction Act Notice, see page 4. Form 4952 (2024)

SCHEDULE B (Form 1040)

Interest and Ordinary Dividends

OMB No. 1545-0074

Department of the Treasury

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleR for instructions and the latest information

2024 Attachment

| Internal Revenue Ser | vice | Go to www.irs.gov/scheduleB for instructions and the latest information. | | Sequence | No. U | <u> </u> |
|--|-------|--|------------|---------------------------|--------|----------|
| Name(s) shown on re Donald Paul Nee | | | Your | social securi 28784877 | | ber |
| Part I | 1 | List name of payer. If any interest is from a seller-financed mortgage and the | _ | Amo | ount | |
| Interest | | buyer used the property as a personal residence, see the instructions and list this | | | | |
| | | interest first. Also, show that buyer's social security number and address: | Ι. | | | |
| (See instructions and the | | Associate Title Agency | | 111,800,9 | 78,85 | 5.28 |
| Instructions for | | | | | | _ |
| Form 1040, line 2b.) | | | | | | _ |
| Note: If you | | | | | | _ |
| received a | | | | | | _ |
| Form 1099-INT, | | | 1 | | | _ |
| Form 1099-OID, or substitute | | | | | | _ |
| statement from | | | | | | _ |
| a brokerage firm, list the firm's | | | | | | _ |
| name as the | | | | | | _ |
| payer and enter | | | | | | _ |
| the total interest shown on that | | | | | | _ |
| form. | | | | | | _ |
| | 2 | Add the amounts on line 1 | 2 | | | |
| | 3 | Excludable interest on series EE and I U.S. savings bonds issued after 1989. | - | | | |
| | 3 | Attach Form 8815 | 3 | | | |
| | 4 | Subtract line 3 from line 2. Enter the result here and on Form 1040 or 1040-SR, line 2b | 4 | 111.800.9 | 79.95 | 5 70 |
| | | | 4 | ,, | | 0.20 |
| | | If line 4 is over \$1,500, you must complete Part III. | | 389,584,3 | ount | 2 20 |
| Part II | 5 | List name of payer: The Country Bank Of needham | | 303,304,3 | 40,77 | 3.30 |
| Ordinary | | | | | | |
| Dividends | | | | | | |
| | | | | | | |
| (See instructions | | | | | | |
| and the Instructions for | | | | | | |
| Form 1040. | | | | | | |
| line 3b.) | | | 5 | | | |
| Note: If you | | | | | | |
| received a | | | | | | |
| Form 1099-DIV or substitute | | | | | | |
| statement from | | | | | | _ |
| a brokerage firm, | | | | | | _ |
| list the firm's | | | | | | _ |
| name as the | | | | | | |
| payer and enter the ordinary | | Addition and the control of the cont | | | | |
| dividends shown | 6 | Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b | 6 | | | |
| on that form. | Note: | If line 6 is over \$1,500, you must complete Part III. | | | | |
| Part III | You m | ust complete this part if you (a) had over \$1,500 of taxable interest or ordinary d | ivider | nds; (b) had | d a fo | reign |
| Foreign | | nt; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign | | | | _ |
| • | | · · · · · · · · · · · · · · · · · · · | | | | |
| Accounts | | | | | Yes | No |
| and Trusts | 7a | At any time during 2024, did you have a financial interest in or signature authority of | | | | |
| Caution: If | | account (such as a bank account, securities account, or brokerage account) locate | ed in | a foreign | | _ |
| required, failure to | • | country? See instructions | | | | × |
| file FinCEN Form 114 may result in | | If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank | and | Financial | | |
| substantial | | Accounts (FBAR), to report that financial interest or signature authority? See Fin0 | | | | |
| penalties. | | and its instructions for filing requirements and exceptions to those requirements . | | | | |
| Additionally, you | ь | If you are required to file FinCEN Form 114, list the name(s) of the foreign country(- | ios) u | vhore the | | |
| may be required to file Form 8938, | | financial account(s) is (are) located: | iesj v | mere me | | |
| Statement of | | mainta accounts is larg rocated. | | | | |
| Specified Foreign | | During 2004 did you receive a distribution from an user you the construction of | | | | |
| Financial Assets. See instructions. | 8 | During 2024, did you receive a distribution from, or were you the grantor of, or t foreign trust? If "Yes," you may have to file Form 3520. See instructions | ranste | eror 10, a | | × |

SCHEDULE D (Form 1040)

Capital Gains and Losses

OMB No. 1545-0074 2024

Attach to Form 1040, 1040-SR, or 1040-NR. Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9, and 10.

Department of the Treasu Internal Revenue Service Attachment Sequence No. 12 Go to www.irs.gov/ScheduleD for instructions and the latest information. ecurity number DONALD PAUL NEEDHAM 287848777 Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? □ No If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss Short-Term Capital Gains and Losses - Generally Assets Held One Year or Less (see instructions) See instructions for how to figure the amounts to enter on the Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g) lines below. This form may be easier to complete if you round off cents to (or other basis) (sales price) combine the resu with column (g) 1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 86,000,000,000 40,000,000,000 46,000,000,000 1b Totals for all transactions reported on Form(s) 8949 with Box A checked 2 Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked . . 4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824 4 ${\bf 5}$ Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from 48,000,000,000 Schedule(s) K-1 6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions 7 Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). If you have any long-132,000,000,000 term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back 7 Long-Term Capital Gains and Losses—Generally Assets Held More Than One Year (see instructions) Part II See instructions for how to figure the amounts to enter on the (h) Gain or (loss) Adiustm lines below to gain or loss from Form(s) 8949, Part II, from column (d) an This form may be easier to complete if you round off cents to whole dollars. (or other basis) line 2. column (a) with column (a) 8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b . 273,600,000,000 122,400,000,000 152,200,000,000 8b Totals for all transactions reported on Form(s) 8949 with Box D checked . 9 Totals for all transactions reported on Form(s) 8949 with Box E checked 10 Totals for all transactions reported on Form(s) 8949 with Box F checked. 11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824 152,200,000,000 12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1 12 13

14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover

15 Net long-term capital gain or (loss). Combine lines 8a through 14 in column (h). Then, go to Part III

15

548,200,000,000

Schedule D (Form 1040) 2024 Page 2

Part III Summary 16 Combine lines 7 and 15 and enter the result 680,200,000,000 • If line 16 is a gain, enter the amount from line 16 on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then, go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, 1040-SR, or 1040-NR, line 7. Then, go to line 22. 17 Are lines 15 and 16 both gains? X Yes. Go to line 18. No. Skip lines 18 through 21, and go to line 22. 18 If you are required to complete the 28% Rate Gain Worksheet (see instructions), enter the 18 If you are required to complete the Unrecaptured Section 1250 Gain Worksheet (see instructions), enter the amount, if any, from line 18 of that worksheet 19 Are lines 18 and 19 both zero or blank and you are not filing Form 4952? ☐ Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. Don't complete lines 21 and 22 below. ■ No. Complete the Schedule D Tax Worksheet in the instructions. Don't complete lines 21 and 22 below. If line 16 is a loss, enter here and on Form 1040, 1040-SR, or 1040-NR, line 7, the smaller of: • The loss on line 16; or 21 • (\$3,000), or if married filing separately, (\$1,500) Note: When figuring which amount is smaller, treat both amounts as positive numbers. 22 Do you have qualified dividends on Form 1040, 1040-SR, or 1040-NR, line 3a? Yes. Complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 16. No. Complete the rest of Form 1040, 1040-SR, or 1040-NR.

Schedule D (Form 1040) 2024

SCHEDULE A (Form 1040)

Itemized Deductions

Attach to Form 1040 or 1040-SR.

Go to www.irs.gov/ScheduleA for instructions and the latest information.

OMB No. 1545-0074 2024

Department of the Treasury Caution: If you are claiming a net qualified disaster loss on Form 4684, see the instructions for line 16.

Attachment Sequence No. 07 Name(s) shown on Form 1040 or 1040-SR 287848777 Medical Caution: Do not include expenses reimbursed or paid by others. 1 6,211,165,491.96 1 Medical and dental expenses (see instructions) . and Dental 2 Enter amount from Form 1040 or 1040-SR, line 11 2 3 Multiply line 2 by 7.5% (0.075) **Expenses** 3 6,211,165,491.96 4 Subtract line 3 from line 1. If line 3 is more than line 1, enter -0- . 4 Taxes You 5 State and local taxes. Paid a State and local income taxes or general sales taxes. You may include either income taxes or general sales taxes on line 5a, but not both. If you elect to include general sales taxes instead of income taxes, 5a 15,527,913,729.9 5b 88,000,000,000.8 **b** State and local real estate taxes (see instructions) c State and local personal property taxes 5c 59,008,072,175.9 5d 160,533,985,905. d Add lines 5a through 5c e Enter the smaller of line 5d or \$10,000 (\$5,000 if married filing 10,000 separately) <u>.</u> 6 Other taxes. List type and amount: 6 31,055,827,459.8 7 Add lines 5e and 6 31,055,837,459.8 Interest 8 Home mortgage interest and points. If you didn't use all of your home You Paid mortgage loan(s) to buy, build, or improve your home, see Caution: Your mortgage interest deduction may be instructions and check this box a Home mortgage interest and points reported to you on Form 1098. ited Se b Home mortgage interest not reported to you on Form 1098. See instructions if limited. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., 8b c Points not reported to you on Form 1098. See instructions for special 8c d Reserved for future use . e Add lines 8a through 8c . 9 Investment interest. Attach Form 4952 if required. See instructions 9 10 Add lines 8e and 9. 10 Gifts to 11 Gifts by cash or check. If you made any gift of \$250 or more, see Charity 11 Caution: If you made a gift and a benefit for it, 12 Other than by cash or check. If you made any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500 . . . 13 Carryover from prior year 13 14 Add lines 11 through 13 . Casualty and 15 Casualty and theft loss(es) from a federally declared disaster (other than net qualified Theft Losses disaster losses). Attach Form 4684 and enter the amount from line 18 of that form. See 15 16 Other-from list in instructions. List type and amount: Job expenses Other Itemized 55.304 **Deductions** 16 Add the amounts in the far right column for lines 4 through 16. Also, enter this amount on Total Form 1040 or 1040-SR, line 12 17 Itemized Deductions 18 If you elect to itemize deductions even though they are less than your standard deduction,

Form 1041-T

Allocation of Estimated Tax Payments to Beneficiaries (Under Code section 643(g))

OMB No. 1545-1020

2024 Go to www.irs.gov/Form1041T for the latest information. Department of the Treasury Internal Revenue Service For calendar year 2024 or fiscal year beginning Jan 01 , 2024, and ending December 31 , 20 24 Name of trust (or decedent's estate) Employer identification nu The Country Bank Of Needham 92-0472145 Fill In Fiduciary's Name and title of fiduciary Telephone number (optional) Name and Address Only if You Are Filing This Form Separately and Not With Form Donald Paul Needham 5134468103 Number, street, and room or suite no. (If a P.O. box, see instructions.) 937 Stratford Place City, state, and ZIP code If you are filing this form for the final year of Mason, Ohio/Anu, 45040-5060 1041. the estate or trust, check this box Total amount of estimated taxes to be allocated to beneficiaries. Enter here and on Form 1041, Schedule G, Part II, Allocation to beneficiaries: 2 (c) Beneficiary's identifying (d) Amount of estimated (e) Proration (a) (b) tax payment allocated to beneficiary No. Beneficiary's name and address number percentage DONALD PAUL NEEDHAM 1 2,500,000 % The Country Bank Of needham 2 152,197,500,000 % Associate Title Agency 3 273,600,000,000 % 4 % 5 % 6 % 7 % 8 % 9 % 10 % 3 Total from additional sheet(s) 3 425,797,500,000 4 Total amounts allocated. (Must equal line 1, above.) . . Sign Here Only if You Are Filing knowledge and belief, it is true, correct, and complete. This Form Separately and

For Paperwork Reduction Act Notice, see instructions.

Signature of fiduciary or officer representing fiduciary

Not With Form 1041.

Cat. No. 64305W

Form 1041-T (2024)

Date

1041-T Allocation of Estimated Tax Payments to Beneficiaries OMB No. 1545-1020

| | | | | | | (Under Co | | | | | | | | 1 60 | 004 | |
|---------------------|----------------------|---------|----------------|--------------------|----------------|------------------|---------------------|---|---------------------------|----------|--------------|------------|--------------|---------------|------------|-------|
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| | trust (or de | | | ndar your zoz | T OF HOUSE J | an Dogmany | Juli | <u>' </u> | , 202 1, 4110 | citaling | | | ification n | umber | | |
| The Co | untry Bani | k of Ne | eedham | | | | | | | | | | 88-07 | 24374 | | |
| | duciary's | | e and title of | fiduciary | | | | | | | Telepho | ne numb | oer (optiona | al) | | |
| Name a | | Dona | ald Paul N | eedham | | | | | | | | | 51344 | 61803 | | |
| Address You Are | | Numb | ber, street, a | and room or si | uite no. (If a | P.O. box, see in | structio | ons.) | | | | | | | | |
| This For | rm Č | 937 8 | Stratford p | lace | | | | | | | | | | | | |
| Separat Not With | | City, s | state, and Z | IP code | | | | | | | If you | are filing | this form | for the fina | l vear of | |
| 1041. | | Maso | on, Ohio/A | nu 45040-50 | 060 | | | | | | | | | k this box | | |
| 1 | Total an | nount | of estin | nated taxe | s to be | allocated to | ben | eficia | ries Ente | er here | and o | n For | m 1041 | Schedule | G. Pa | rt II |
| | line 11 . | | | | | | | | | | | | . \$ | | 00,958,855 | |
| 2 | Allocatio | n to b | eneficiar | ies: | | | | | | | | | _ | | | |
| | | | | | | | | | (6 | c) | | | (d) | | (e) | |
| (a) No. | | | Renefic | (b) iary's name | and addre | 29 | | В | eneficiary' | | ying | | ount of es | | Prorati | |
| | | | Donono | ary o name | and address | | | | nun | nber | | | to benefic | | percent | age |
| 1 | Donald F | Paul Ne | leedham | | | | | | | | | | | | | |
| | | | | | | | | | | | | | 2, | 520,000.00 | 95 | % |
| 2 | The Cou | ntry ba | ank of Nee | dham | | | | | | | | | | | | |
| | | | | | | | | | | | | | 52,794, | 906,679.90 | 95 | % |
| 3 | Associat | e Title | Agency | | | | | | | | | | | | | |
| | | | | | | | | | | | | | 59,003, | 552,175.38 | 95 | % |
| 4 | | | | | | | | | | | | | | | | |
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| 10 | | | | | | | | | | | | | | | | % |
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| 3 | Total from | m add | ditional sh | neet(s) . | | | | | | | 3 | | | | | |
| | | | | | | | | | | | | | | | | |
| | | ounts | allocated | d. (Must eq | ual line 1 | , above.) . | | | | | 4 | | 111,800, | 958,855.28 | | |
| | re Only re Filina | Under | er penalties | of perjury, I d | eclare that I | have examined | d this al | llocatio | n, including | accomp | anying s | chedules | and state | ments, and to | the best | of my |
| This Fo | | Knowl | nedge and b | elief, it is true | , correct, an | a complete. | | | | | | | | | | |
| Separa | tely and | | | | | | | | | | | | | | | |
| Not Wit | h Form | | | | | | | | | | | — . | 2-1- | | | |
| 1041. | | Sign | nature of fid | uciary or offic | er represent | ing fiduciary | | | | | | [| Date | | | |

| Name, address, and ZIP code of RIC or | | RRECTED | | | | | |
|--|---|---|---|--|---|--|--|
| The Country bank of Needham Thecountrybankofneedham.com 45040-5060 | HEII | OMB No. 1545-0123 Form 2439 (Rev. November 2021) | F | ice to Shareholde Long-Term Ca For calendar year 20 2 If the regulated investmer real estate investme beginning Jan 01 ending Dec 31 | apita 24 , control 1 compent true , 20 | or other tax year pany (RIC) or the ust (REIT) | |
| Identification number of RIC or REIT | | 1a Total undistributed long-te | erm capi | | | | |
| 5050 Shareholder's identifying number 5060 | | 1b Unrecaptured section 125 | i0 gain | 720,000,00 273,600,00 | | Copy D For records of the regulated | |
| Shareholder's name, address, and ZIP of Donald Needham, 937 Stratford pla | | | 152,200,000,000 310,000,000,000 ax paid by the RIC or REIT on the box 1a gains | | | | |
| Form 2439 (Rev. 11-2021) | | | | 122,400,00 | 0,000 | | |
| Name, address, and ZIP code of RIC or | | DRRECTED | | No. 1. Charab | | | |
| Name, address, and ZIP code of RIC or The Country bank of Needham | KEII | OMB No. 1545-0123 | No | tice to Sharehold Long-Term C | | | |
| Thecountrybankofneedham.com 45040-5060 | | Form 2439 | | For calendar year 20 of the regulated investme real estate investments | 24 ent con | or other tax year npany (RIC) or the | |
| | | (Rev. November 2021) | | beginning Jan 01 ending Dec 31 | | | |
| Identification number of RIC or REIT | | 1a Total undistributed long-t | term cap | - | | Copy B | |
| 5050 Shareholder's identifying number 5060 | | 1b Unrecaptured section 129 | 50 gain | 720,000,0 273,600,0 | | Attach to the shareholder's | |
| Shareholder's name, address, and ZIP | code | 1c Section 1202 gain | \Box | 1d Collectibles (28%) gain | | for the tax year | |
| Donald Needham, 937 Stratford pla | 200 45040-5060 | 152,200,00 | 00,000 | | 00,000 | | |
| Bondia Nocaliani, 557 Ottatiora pie | 3040-3000 | 2 Tax paid by the RIC or RI | EIT on th | ne box ra gains | | last day of the RIC's or REIT's | |
| Bondia Necanam, 507 Ottationa pie | 200 43040-3000 | | EIT on ti | 122,400,0 | 00,000 | RIC's or REIT's tax year. | |
| Form 2439 (Rev. 11-2021) | www | 2 Tax paid by the RIC or Rt | EIT on ti | 122,400,0 | | RIC's or REIT's tax year. | |
| FILER'S name, street address, city or | www | 2 Tax paid by the RIC or RI | EIT on the | 122,400,0 | | RIC's or REIT's tax year. | |
| form 2439 (Rev. 11-2021) | www | 2 Tax paid by the RIC or RI | | 122,400,0 Department of the Tri OMB No. 1545-0997 Form 1099-S | Proc | RIC's or REIT's tax year. - Internal Revenue Servi | |
| FILER'S name, street address, city or ZIP or foreign postal code, and teleph The Country bank of Needham | WWW VOID CO town, state or province, country | 2 Tax paid by the RIC or RI Lirs.gov/Form2439 DRRECTED y, 1 Date of closing | | 122,400,0 Department of the To | Proc | RIC's or REIT's tax year. - Internal Revenue Servi | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham.com 937 Statford place mason/needhar | www | 2 Tax paid by the RIC or RI Lirs.gov/Form2439 DRRECTED y, 1 Date of closing Dec 31 202- 2 Gross proceeds \$ 740,000,000 | 4 | 122,400,0 Department of the Ti OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 0 20 24 | Proc Esta | RIC's or REIT's tax year. - Internal Revenue Serviceeds From Reaate Transaction: | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham.com 937 Statford place mason/needhar | vww | 2 Tax paid by the RIC or RI irs.gov/Form2439 DRRECTED y, 1 Date of closing Dec 31 202 2 Gross proceeds \$ 740,000,000 3 Address (including of | 0,000.0 city, state | 122,400,0 Department of the Ti OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 0 20 24 e, and ZIP code) or legal desc | Proc Esta | RIC's or REIT's tax year. Internal Revenue Serveceeds From Reaate Transaction: | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham.com 937 Statford place mason/needhar | www | 2 Tax paid by the RIC or RI irs.gov/Form2439 DRRECTED y, 1 Date of closing Dec 31 202 2 Gross proceeds \$ 740,000,000 3 Address (including of | 0,000.0 city, state | 122,400,0 Department of the Ti OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 0 20 24 | Proc Esta | RIC's or REIT's tax year. Internal Revenue Serveceeds From Reaate Transaction: | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham.com 937 Statford place mason/needhar FILER'S TIN 920472145 TRANSFEROR'S name Jordan Southerland | vww | DRRECTED J Date of closing Dec 31 202 2 Gross proceeds \$ 740,000,000 3 Address (including of 45040-5060) 4 Check here if the | 0,000.0 city, state, Masc | Department of the Ti OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 20 24 e, and ZIP code) or legal descon/Needham Ohio/Anu ror received or will receive | Proc Esta | RIC's or REIT's tax year. - Internal Revenue Serv ceeds From Reaate Transaction: Copy (For File | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham.com 937 Statford place mason/needhar FILER'S TIN 920472145 TRANSFEROR'S name Jordan Southerland Street address (including apt. no.) 1080 Olympia Crt | vww VOID CC town, state or province, country none number n Ohio/anu 45040-5060 TRANSFEROR'S TIN 455518901 | 2 Tax paid by the RIC or RI Lirs.gov/Form2439 DRRECTED 7, 1 Date of closing Dec 31 202- 2 Gross proceeds \$ 740,000,000 3 Address (including of 937 Stratford Place 45040-5060) 4 Check here if the property or service 5 Check here if the | 0,000.0 city, state, Masce e transfees as pa | Department of the To Department of the To OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 0 20 24 e, and ZIP code) or legal descon/Needham Ohio/Anu or received or will receive to of the consideration offeror is a foreign person | Proc Esta | RIC's or REIT's tax year. - Internal Revenue Serv ceeds From Reaate Transaction: Copy (For File For Privacy Acand Paperwor Reduction Ac | |
| FILER'S name, street address, city or ZIP or foreign postal code, and telept The Country bank of Needham TheCountrybankofNeedham com 937 Statford place mason/needhar FILER'S TIN 920472145 TRANSFEROR'S name Jordan Southerland Street address (including apt. no.) | www | 2 Tax paid by the RIC or RI Lirs.gov/Form2439 DRRECTED 7, 1 Date of closing Dec 31 202- 2 Gross proceeds \$ 740,000,000 3 Address (including of 937 Stratford Place 45040-5060) 4 Check here if the property or service 5 Check here if the | 4 4 0,0,000.0 city, state, Masco transfees as pare transfers, foreign | Department of the Tri OMB No. 1545-0997 Form 1099-S (Rev. January 2022) For calendar year 0 20 24 e, and ZIP code) or legal descon/Needham Ohio/Anu or received or will receive the consideration steror is a foreign person partnership, foreign estate, | Proc Esta | RIC's or REIT's tax year. Internal Revenue Serveceds From Reaate Transaction Copy (For File | |

| | CORR | ECTE | D (if checked) | | _ | | |
|--|-----------------------------------|------------|----------------------------------|-----------------------------|------------------------------------|---|--|
| FILER'S name, street address, city or ZIP or foreign postal code, and teleph | | 1 D | ate of closing | OMB No. 1545-0997 | | | |
| The Country bank of Needham TheCountrybankofNeedham.com | one number | | dec 31 2024 | Form 1099-S | Pro | ceeds From Rea | |
| 937 Statford place mason/needham Ohio/anu 45040-5060 | | | ross proceeds | Est | Estate Transactions | | |
| | | | | For calendar year | | | |
| | | \$ | 720,000,000,000.00 | 20_24_ | | | |
| FILER'S TIN | TRANSFEROR'S TIN | 3 A | ddress (including city, state, a | and ZIP code) or legal desc | ription | Copy E | |
| 920472145 | 455518901 | | Stratford Place Mason/ | Needham Ohio/Anu | | For Transfero | |
| TRANSFEROR'S name | | 450 | 40-4050 | | This is important ta | | |
| Jordan Southerland | | | | | | information and is being furnished to the IRS. I | |
| oordan oodinenand | | 4 T | ransferor received or will re- | you are required to file | | | |
| Street address (including apt. no.) | | a | s part of the consideration (| if checked) | | return, a negligence | |
| 1080 Olympia Crt | | | checked, transferor is a for | | penalty or othe sanction may be | | |
| City or town, state or province, country | y, and ZIP or foreign postal code | | lien, foreign partnership, f | | imposed on you if this | | |
| Mason Ohio/Anu Anu/U.s 45040- | 5060 | " | usty | | | item is required to be reported and the IRS | |
| Account number (see instructions) | | 6 B | uyer's part of real estate ta | x | | determines that it has | |
| 5024 | 3026 | \$ | | \$1,020,339,347,5 | 98.20 | not been reported | |

Form **1099-S** (Rev. 1-2022)

(keep for your records)

www.irs.gov/Form1099S

Department of the Treasury - Internal Revenue Service

| Form | 104 | 41 U.S. I | ent of the Treasury—Internal Rever Income Tax Return ww.irs.gov/Form1041 for instruct | for Esta | tes and Trus | sts | 2 | 02 | 24 | 0 | MB No. 1545-0092 |
|--|-----------------------|-----------------------|---|-------------------|-------------------------|--------------|------------------|----------|-----------------------|------------|---|
| A C | heck al | II that apply: | For calendar year 2024 or | fiscal year be | eginning Ja | an 1 | , 2024, and | endin | g [|)eoemb | er 31 , 20 24 |
| | eceder) | nt's estate | Name of estate or trust (If a gr | antor type trus | t, see the instructions | s.) | | С | Employ | er ident | ification number |
| <u> </u> | Simple t | rust | The country bank of need | ham | | | | | | | 24374 |
| | Complex | x trust | Name and title of fiduciary | | | | | D | Date en | tity creat | ed |
| X | ualified | d disability trust | Donald Needham Director | | | | | | | 20 |)22 |
| E | SBT (S | portion only) | Number, street, and room or s | uite no. (If a P. | O. box, see the instru | uctions.) | | E | Nonexer | npt char | itable and split-interest |
| × | Grantor | type trust | 937 Stratford Place | | | | | | trusts, c See inst | | olicable box(es). |
| E | Bankrup | tcy estate-Ch. 7 | | | | | | Iп | Describe | ed in sec | . 4947(a)(1). Check here |
| _ | | tcy estate-Ch. 11 | City or town, state or province | , country, and | ZIP or foreign postal | code | | 7- | if not a p | orivate fo | oundation |
| Ē | ooled i | ncome fund | Mason, Ohio/Anu Anu/Us | 45040-5060 | | | | | Describe | ed in sec | . 4947(a)(2) |
| BN | lumber | of Schedules K-1 | F Check X Initial return | | Final return | ☐ Ame | ended return | | | Net ope | rating loss carryback |
| | ttached nstruction | | applicable — | | Change in fiducia | ary Cha | nge in fiduciary | r's nan | | | in fiduciary's address |
| | | | ing trust made a section 645 ele | | | | Trust TIN | | | | |
| | 1 | Interest incom | | | | | | | | 1 | 111,800,978,855.2 |
| | 2a | | dividends | | | | | • | | 2a | 310,558,274,598 |
| | b | | ends allocable to: (1) Benefi | | | | niet | • | | | |
| | 3 | | me or (loss). Attach Sche | | | | | | | 3 | |
| Ĕ | 4 | | r (loss). Attach Schedule | • | • | | | • | | 4 | |
| псоте | 5 | | es, partnerships, other es | | | | | 40) | | 5 | |
| ž | 6 | | or (loss). Attach Scheduk | | • | | L (1 01111 10 | , | | 6 | |
| | 7 | | or (loss). Attach Form 47 | • | • | | | • | | 7 | 59,006,072,175.38 |
| | 8 | | List type and amount | | | | | • | | 8 | |
| | 9 | | . Combine lines 1, 2a, an | d 3 through | . R | | | | | 9 | 369,564,346,773,0 |
| - | 10 | | k if Form 4952 is attache | | | | | | • • | 10 | |
| | 11 | _ | | | | | | | | 11 | 7,826,088,519.88 |
| | 12 | | | | r coction 67(a) c | oo inetruct | ione | | | 12 | 7,020,000,010.00 |
| | 13 | - | duction (from Schedule A | | | | | • | | 13 | |
| | 14 | | ountant, and return prepa | , | | | | tion | 67(a) | 19 | |
| m | | see instruction | | | · · · · · | deductibi | e under sec | LIOII | 07 (0), | 14 | 323,976 |
| Ë | 15a | | ons (attach schedule). Se | | | e allowable | under see | tion 6 | 37(0) | 15a | 020,010 |
| Deductions | b | | loss deduction. See inst | | ins for deduction | is allowable | e under sec | uon |) (e) | 15b | 52.794.906.679.90 |
| 휽 | 16 | Add lines 10 t | | | | | | | | 16 | 60,621,299,175.76 |
| ě | 17 | | income or (loss). Subtra | | om line 0 | | 17 308,9 | 43.04 | 7.597 : | 10 | 00,021,200,110.11 |
| _ | 18 | | oution deduction (from So | | | | | | | 18 | |
| | 19 | | duction including certain | | | | | J41) | | 19 | 53,443,887,585.74 |
| | 20 | | ness income deduction. | _ | | | putation, . | • | | 20 | 00,110,001,000.1 |
| | 21 | | | | | ٠ | | | | 21 | |
| | 22 | • | hrough 21 | | | | | | | 22 | 53,443,887,585,74 |
| | 23 | | ne. Subtract line 22 from | line 17 lf a | | tione | | • | • • | 23 | 255,499,160,011.5 |
| Payments | 24 | | n Schedule G, Part I, line | | | | | | | 24 | 222,100,100,011.0 |
| E E | 25 | | net 965 tax liability paid fr | | | | o inetruction | ne\ | | 25 | |
| ž | 26 | - | nts (from Schedule G, Pa | | | | | 13) | | 26 | |
| ď | 27 | | penalty. See instructions | | | | | | | 27 | 59,008,072,175.38 |
| and | 28 | | e 26 is smaller than the to | | | | | | | 28 | 55,555,572,175.50 |
| a | 29 | | | | | | | | | 29 | |
| Tax | 30 | | t. If line 26 is larger than t e 29 to be: a Credited to | | | b Refund | | paid | | 30 | |
| - | | | | | | | | ments | and to | | of my knowledge and |
| Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has | | | | | | | | | | | |
| He | - 1 | | | 1 | | | 455518901 | | | | e IRS discuss this return |
| пе | - | Signature of fiducion | y or officer representing fiduciar | , , | Date | CIN et ea | | d in the | ndia- | | e preparer shown below? structions. Yes No |
| _ | _ | Preparer's nan | | Preparer's si | | CIN OF TIDUC | Date | ai instr | _ | _ | PTIN |
| Pa | id | r reparer s flam | 110 | reparer 8 8 | gradie | | Date | | Check self-en | | |
| Pre | pare | er | Dingir Firm | | | | | F | _ | ,, | |
| Us | e On | Firm's name | | in 45040 | | | | Firm's | | | 5134468103 |
| _ | | Firm's address | 1000 Olympia Wason On | 10 10010 | | | | Phone | e no. | , | 710-100100 |

Form 1041 (2024)

| Sch | edule A Charitable Deduction. Don't complete for a simple trust or a pooled income fund. | | |
|------------|--|----------|-------------------|
| 1 | Amounts paid or permanently set aside for charitable purposes from gross income. See instructions | 1 | 323,976 |
| 2 | Tax-exempt income allocable to charitable contributions. See instructions | 2 | |
| 3 | Subtract line 2 from line 1 | 3 | |
| 4 | Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable | | |
| | purposes | 4 | 323,976 |
| 5 | Add lines 3 and 4 | 5 | 323,976 |
| 6 | Section 1202 exclusion allocable to capital gains paid or permanently set aside for charitable | | |
| | purposes. See instructions | 6 | |
| 7 | Charitable deduction. Subtract line 6 from line 5. Enter here and on page 1, line 13 | 7 | |
| | edule B Income Distribution Deduction | _ | |
| 1 | Adjusted total income. See instructions | 1 | |
| 2 | Adjusted tax-exempt interest | 2 | 59,006,072,175.38 |
| 3 | Total net gain from Schedule D (Form 1041), line 19, column (1). See instructions | 3 | |
| 4 | Enter amount from Schedule A, line 4 (minus any allocable section 1202 exclusion) | 4 | 1,209,600,000,000 |
| 5 | Capital gains for the tax year included on Schedule A, line 1. See instructions | 5 | 6,211,165,491.96 |
| 6 | Enter any gain from page 1, line 4, as a negative number. If page 1, line 4, is a loss, enter the loss as a positive number | _ | |
| _ | · | 6 | |
| 7 8 | Distributable net income. Combine lines 1 through 6. If zero or less, enter -0 | 7 | 1,274,817,237,667 |
| 8 | If a complex trust, enter accounting income for the tax year as determined under the governing instrument and applicable local law | | |
| | | - | |
| 9 10 | Income required to be distributed currently | 10 | |
| | . , , , | 11 | |
| 11 12 | Total distributions. Add lines 9 and 10. If greater than line 8, see instructions | 12 | |
| 13 | Tentative income distribution deduction. Subtract line 12 from line 11 | 13 | |
| 14 | Tentative income distribution deduction. Subtract line 12 from line 11 | 14 | |
| 15 | Income distribution deduction. Enter the smaller of line 13 or line 14 here and on page 1, line 18 | 15 | |
| | edule G Tax Computation and Payments (see instructions) | 10 | |
| | I — Tax Computation | | |
| 1 | Tax: | | |
| а | Tax on taxable income. See instructions | | |
| | Tax on lump-sum distributions. Attach Form 4972 | 1 | |
| C | | 1 | |
| d | Amount from Form 4255, Part I, line 3, column (q) 1d | 1 | |
| е | Total. Add lines 1a through 1d | 1e | 31,055,827,459.8 |
| 2 a | Foreign tax credit. Attach Form 1116 | | |
| b | General business credit. Attach Form 3800 | | |
| C | Credit for prior year minimum tax. Attach Form 8801 | | |
| d | Bond credits. Attach Form 8912 | | |
| е | Total credits. Add lines 2a through 2d | 2e | 31,055,827,459.8 |
| 3 | Subtract line 2e from line 1e. If zero or less, enter -0 | 3 | |
| 4 | Tax on the ESBT portion of the trust (from ESBT Tax Worksheet, line 17). See instructions | 4 | |
| 5 | Net investment income tax from Form 8960, line 21 | 5 | |
| 6a | | 6a | |
| b | Recapture tax from Form 8611 | 6b | |
| C | Other recapture taxes: | 6c | |
| 7 | Household employment taxes. Attach Schedule H (Form 1040) | 7 | |
| 8 | Other taxes and amounts due | 8 | |
| 9 | Total tax. Add lines 3 through 8. Enter here and on page 1, line 24 | 9 | |

Page 3

| | edule G Tax Computation and Payments (see instructions) (continued) I — Payments | | |
|--------------|--|---------|--------|
| 10 | , | 4,906, | 679.9 |
| 11 | | 0,958, | 855.2 |
| 12 | | 8,052,1 | 75.38 |
| 13 | Tax paid with Form 7004. See instructions | | |
| 14 | Federal income tax withheld. If any is from Form(s) 1099, check here 🗵 | 84,348 | ,773.3 |
| 15 | Current year net 965 tax liability from Form 965-A, Part I, column (f) (see instructions) 15 | | |
| 16 | Payments from Form 2439 | 000,00 | 0,000 |
| 17 | Payments from Form 4136 | | |
| 18a | Elective payment election amount from Form 3800 | | |
| b | Other credits or payments (see instructions) | | |
| 19 | Total payments. Add lines 12 through 18b. Enter here and on page 1, line 26 | ,245,38 | 35,483 |
| Other | Information | Yes | No |
| 1 | Did the estate or trust receive tax-exempt income? If "Yes," attach a computation of the allocation of expenses. | | X |
| | Enter the amount of tax-exempt interest income and exempt-interest dividends \$ | | |
| 2 | Did the estate or trust receive all or any part of the earnings (salary, wages, and other compensation) of any | | |
| | individual by reason of a contract assignment or similar arrangement? | × | |
| 3 | At any time during calendar year 2024, did the estate or trust have an interest in or a signature or other authority | | |
| | over a bank, securities, or other financial account in a foreign country? | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country | | |
| 4 | During the tax year, did the estate or trust receive a distribution from, or was it the grantor of, or transferor to, a | | |
| | foreign trust? If "Yes," the estate or trust may have to file Form 3520. See instructions | | X |
| 5 | Did the estate or trust receive, or pay, any qualified residence interest on seller-provided financing? If "Yes," see the instructions for the required attachment | × | |
| 6 | If this is an estate or a complex trust making the section 663(b) election, check here. See instructions | | |
| 7 | To make a section 643(e)(3) election, attach Schedule D (Form 1041), and check here. See instructions | | ١. |
| 8 | If the decedent's estate has been open for more than 2 years, attach an explanation for the delay in closing the | | |
| | estate, and check here | | _ |
| 9 | Are any present or future trust beneficiaries skip persons? See instructions | × | |
| 10 | Was the trust a specified domestic entity required to file Form 8938 for the tax year? See the Instructions for Form 8938 | | |
| 11a | Did the estate or trust distribute S corporation stock for which it made a section 965(i) election? | | X |
| b | If "Yes," did each beneficiary enter into an agreement to be liable for the net tax liability? See instructions | X | |
| 12 | Did the estate or trust either make a section 965(i) election or enter into a transfer agreement as an eligible section | | |
| | 965(i) transferee for S corporation stock held on the last day of the tax year? See instructions | × | |
| 13 | At any time during the tax year, did the estate or trust (a) receive (as a reward, award, or payment for property or | | |
| | services); or (b) sell, exchange, or otherwise dispose of a digital asset (or a financial interest in a digital asset)? See | | _ |
| | instructions | X | |
| | | | |
| 14 | ESBTs only. Does the ESBT have a nonresident alien grantor? If "Yes," see instructions | X | |

Form 4255 (Rev. December 2023) Department of the Treasury

Internal Revenue Service

Recapture of Investment Credit

Attach to your tax return.

Go to www.irs.gov/Form4255 for instructions and the latest information.

OMB No. 1545-0166

Attachment Sequence No. 172

The Country Bank Of Needham Properties Type of property—State whether rehabilitation, energy, qualifying advanced coal project, qualifying gasification project, qualifying advanced energy project, or advanced manufacturing investment property. (See the Instructions for Form 3468 for the year the investment credit property was placed in service for definitions.) If rehabilitation property, also show type of building. If energy property, show type. advanced energy project: \$ 111,800,958,855.00 Α advanced manufacturing investment property: \$ 720,000,000,000.00 В C advanced energy project: \$ 220,805,093,321.00 investment credit property: \$82,412,106,172.00 D Part I Original Investment Credit These columns relate to the properties A **Properties** through D described above C D 310,558,274,598 59,006,072,175.38 1 369,564,346,773.: 52,794,906,679.9 1 Original rate of credit 2 Credit base as of the end of the previous tax year (see instructions) 111.800.958.855 369,564,346,773.0 52,794,906,679.9 59,006,072,175.38 3 Net change in nonqualified nonrecourse financing during the tax year. If a net decrease, enter as a 720,000,000,000 273,600,000,000 152,197,500,000 122,400,000,000 negative number 4 Credit base as of the end of the current tax year. Subtract line 3 from line 2 -40,396,541,145 350,435,653,227 220,805,093,321 63,393,927,825 455,588,349,195 287,048,621,317. 5 Refigured credit (see instructions) 82,412,106,172 5 Credit taken for this property on Form 3800 in prior years. See instructions Part II Recapture From Increase in Nonqualified Nonrecourse Financing (see instructions) Credit subject to recapture due to a net increase in nonqualified nonrecourse financing. Subtract line 5 455,586,349,195 287,048,621,317.3 40,408,660,107 82,412,106,172 from line 6. If zero or less, enter -0- 8 Unused general business credits that would have been allowed if original credit had been figured with 60,621,299,175 60,621,299,175 current-year credit base (see instructions) . . . 60,621,299,175 60,621,299,175 Subtract line 8 from line 7. This is the recapture tax as a result of a net increase in nonqualified nonrecourse financing 21,790,808,997 394,945,050,020 228,425,322,142.: 21.790.806.997 Part III Recapture From Disposition of Property or Cessation of Use as Investment Credit Property 10 Date property was placed in service . . . 1,135,018,158,348 664,951,986,156 10 11 Date property ceased to be qualified investment 11 2000 credit property 12 Number of full years between the date on line 10 12 and the date on line 11 13 Unused general business credits that would have been allowed had there been no credit from this property (see instructions) 60,621,299,175.7(60,621,299,175.7(60,621,299,175.7(60,621,299,175.7(13 14 80,821,299,175.7(80,821,299,175.7(80,821,299,175.7(60.621,299,175.76 14 Subtract line 13 from line 6. . 30% 30% 30% 30% 15 Recapture percentage (see instructions) . 15 18,186,389,752.72 18.186.389.752.72 18,186,389,752.7 18.186.389.752 16 Multiply line 14 by the percentage on line 15 . 16 1,799,970,144,504 17 Add property columns A through D, line 9 . . 17 18 1,207,763,717,358 18 Add property columns A through D, line 16 19 20 3,007,733,861,862 20 Total increase in tax. Add lines 17 and 18. Enter here and on the appropriate line of your tax return

SCHEDULE C (Form 1040)

Profit or Loss From Business (Sole Proprietorship)

OMB No. 1545-0074 2024

| Departn Internal | partment of the Treasury ernal Revenue Service Attach to Form 1040, 1040-SR, 1040-SS, 1040-NR, or 1041; partnerships must generally file Form 1065. Attachment Sequence No. 09 | | | | | | | | | | | |
|---------------------|--|---------------|---|-----------|--|-----|-------|------------------------------------|--|--|--|--|
| | of proprietor | | | | | S | ocial | security number (SSN) | | | | |
| Donal | d P Needham | | | | | | | 287848777 | | | | |
| A | Principal business or profe | ession, inc | luding product or service (se | e instr | uctions) | В | Enter | code from instructions | | | | |
| Assoc | siate Title Agency Governm | ent andor | (Currency) | | | | 4 | 5 4 1 1 2 | | | | |
| С | Business name. If no sepa | arate busin | ess name, leave blank. | | | D | Empl | oyer ID number (EIN) (see instr.) | | | | |
| DONA | ALD PAUL NEEDHAM | | | | | 8 | 8 | 9 7 2 4 3 7 4 | | | | |
| E | Business address (includi | ng suite or | room no.) | | | | | | | | | |
| | City, town or post office, | state, and | ZIP code Mason/Needham | Post N | Masters, Ohio/Anu 45040-5060 | | | | | | | |
| F | Accounting method: (1 |) X Cas | h (2) 🗌 Accrual (3 | 3) 🗌 | Other (specify) | | | | | | | |
| G | | | | | 2024? If "No," see instructions for li | mit | on lo | sses . K Yes 🗌 No | | | | |
| Н | If you started or acquired | this busin | ess during 2024, check here | | | | | 🔲 | | | | |
| ı | | | that would require you to fi | le Forn | n(s) 1099? See instructions | | | 🔲 Yes 🔲 No | | | | |
| J | If "Yes," did you or will yo | u file requ | red Form(s) 1099? | | | _ | | Tes No | | | | |
| Part | Income | | | | | _ | | | | | | |
| 1 | | | tions for line 1 and check the yee" box on that form was c | | f this income was reported to you on | | 1 | 5,765,619,552,594 | | | | |
| 2 | Returns and allowances | - | | | | T | 2 | 35,767,291,334 | | | | |
| 3 | Subtract line 2 from line 1 | | | | | t | 3 | | | | | |
| 4 | Cost of goods sold (from | line 42) | | | | T | 4 | 1,076,778,665,889 | | | | |
| 5 | Gross profit. Subtract lin | e 4 from lir | ne3 | | | Т | 5 | 1,076,778,665,889 | | | | |
| 6 | Other income, including for | ederal and | state gasoline or fuel tax cre | edit or | refund (see instructions) | Ι | 6 | | | | | |
| 7 | Gross income. Add lines | 5 and 6 | | | | | 7 | 1,076,778,665,889 | | | | |
| Part | Expenses. Enter | expense | es for business use of ye | our ho | ome only on line 30. | _ | | | | | | |
| 8 | Advertising | . 8 | 8,988,999,378 | 18 | Office expense (see instructions) . | Т | 18 | 88,665,399 | | | | |
| 9 | Car and truck expens | es | | 19 | Pension and profit-sharing plans . | Ι | 19 | 5,675,991 | | | | |
| | (see instructions) | | 657,887,889 | 20 | Rent or lease (see instructions): | J | | | | | | |
| 10 | Commissions and fees | . 10 | 75,993,449 |] a | Vehicles, machinery, and equipment | | 20a | 5,399,443,958 | | | | |
| 11 | Contract labor (see instruction | ns) 11 | 98,224,456 |] ь | Other business property | | 20b | | | | | |
| 12 | Depletion | . 12 | 892,334,556 | 21 | Repairs and maintenance | I | 21 | 75,293 | | | | |
| 13 | Depreciation and section 1 | | | 22 | Supplies (not included in Part III) . | L | 22 | 6,443,229 | | | | |
| | expense deduction (r included in Part III) (s | | | 23 | Taxes and licenses | L | 23 | 1,076,778,665,889 | | | | |
| | instructions) | 13 | 17,892,334,556 | 24 | Travel and meals: | J | | 440.000.000 | | | | |
| 14 | Employee benefit program | | | a | Travel | - | 24a | 418,288,399 | | | | |
| | (other than on line 19) | . 14 | 2 002 402 | ь | Deductible meals (see instructions) | ļ | 24b | 4 000 045 | | | | |
| 15 | Insurance (other than heal | th) 15 | 3,886,498 | 25 | Utilities | 1 | 25 | 4,928,345 | | | | |
| 16 | Interest (see instructions): | | 1.257.317.229.559 | 26 | Wages (less employment credits) | 1 | 26 | 16,002,345 | | | | |
| а | Mortgage (paid to banks, e | | 1,207,317,229,009 | 27a | Other expenses (from line 48) | 1 | 27a | | | | | |
| Ь | Other | . 16b | 25.485.499 | ь | Energy efficient commercial bldgs | | | | | | | |
| | Legal and professional service | _ | | | deduction (attach Form 7205) | 4 | 27b | | | | | |
| 28 | | - | r business use of home. Add | i lines | B through 27b | 1 | 28 | | | | | |
| 29 | Tentative profit or (loss). S | | | | | 1 | 29 | | | | | |
| 30 | Expenses for business u unless using the simplified | | | e expe | nses elsewhere. Attach Form 8829 | 1 | | | | | | |
| | Simplified method filers | only: Ente | r the total square footage of | (a) you | ır home: | | | | | | | |
| | and (b) the part of your ho | me used f | or business: | | . Use the Simplified | | - 1 | | | | | |
| | Method Worksheet in the | instruction | s to figure the amount to en | ter on | line 30 | L | 30 | | | | | |
| 31 | Net profit or (loss). Subtr | act line 30 | from line 29. | | | | | | | | | |
| | | | 1 (Form 1040), line 3, and ouctions.) Estates and trusts, | | | | 31 | | | | | |
| | • If a loss, you must go t | | ,, | | | - | | | | | | |
| 32 | , , | | at describes your investment | t in this | activity. See instructions. | | | | | | | |
| | • If you checked 32a, enter | er the loss | on both Schedule 1 (Form | 1040), | line 3, and on Schedule | | | | | | | |
| | | the box or | line 1, see the line 31 instruc | ctions.) | Estates and trusts, enter on | | | All investment is at risk. | | | | |
| | Form 1041, line 3. | | | | | | 32b | Some investment is not at risk. | | | | |
| | If you checked 32b, you | must atta | ch Form 6198. Your loss m | ay be li | mited. | | | at fisk. | | | | |

| scnedu | e C (Form 1040) 2024 | | | Page Z |
|-----------|---|--------|-------------|-------------|
| Part | Cost of Goods Sold (see instructions) | | | |
| 33 | Method(s) used to value closing inventory: a ☑ Cost b ☐ Lower of cost or market c ☐ Other (atta | ach ex | planation) | |
| 34 | Was there any change in determining quantities, costs, or valuations between opening and closing invento If "Yes," attach explanation . | ry? | . Yes | ₹ No |
| 35 | Inventory at beginning of year. If different from last year's closing inventory, attach explanation | 35 | | |
| 36 | Purchases less cost of items withdrawn for personal use | 36 | | |
| 37 | Cost of labor. Do not include any amounts paid to yourself | 37 | | 8,300,000 |
| 38 | Materials and supplies | 38 | | 53,009,888 |
| 39 | Other costs | 39 | | 759,634 |
| 40 | Add lines 35 through 39 | 40 | | |
| 41 | Inventory at end of year | 41 | 5,765,6 | 19,552,594 |
| 42 | Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 | 42 | | |
| Part | | | | |
| 43 | When did you place your vehicle in service for business purposes? (month/day/year) 01 / 01 / | | | |
| 44 | Of the total number of miles you drove your vehicle during 2024, enter the number of miles you used your | | for: | |
| а | Business 167,888 b Commuting (see instructions) 351,957 c C |)ther | | |
| 45 | Was your vehicle available for personal use during off-duty hours? | | 🔁 Yes | ☐ No |
| 46 | Do you (or your spouse) have another vehicle available for personal use? | | 🔁 Yes | ☐ No |
| 47a | Do you have evidence to support your deduction? | | 🖺 Yes | ■ No |
| b Part | If "Yes," is the evidence written? Other Expenses. List below business expenses not included on lines 8–26, line | 27b, | or line 30. | □ No |
| | | | | |
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| | | | | Final K-1 X Amended | V 4 | L51123 OMB No. 1545-0123 |
|----------------|---|--------------|------------------|---|--------|-------------------------------------|
| Sch | edule K-1 ⊘⊘€ | 1 | | Partner's Share of | | |
| (For | rm 1065) 202 | 4 | | Deductions, Credi | | |
| | rtment of the Treasury | | 1 | Ordinary business income (loss) | 14 | Self-employment earnings (loss) |
| Intern | al Revenue Service For calendar year 2024, | or tax year | | 425,797,500,000 | | 483,499 |
| D | beginning 01 / 01 / 2024 ending 12 / 31 / | 2024 | 2 | Net rental real estate income (loss) 35,769 | | |
| | tner's Share of Income, Deductions, | | 3 | Other net rental income (loss) | 15 | Credits |
| Cre | dits, etc. See separate ins | tructions. | | 34,998 | | 1,799,970,144,504 |
| F | art I Information About the Partnership | | 4a | Guaranteed payments for services | | |
| A | Partnership's employer identification number | | | 720,005,000,000 | | |
| | 92-0472145 | | 4b | Guaranteed payments for capital | 16 | Schedule K-3 is attached if checked |
| В | Partnership's name, address, city, state, and ZIP code | | 4- | 1,799,970,144,504 | 47 | |
| | Country bank of Needham | | 4c | Total guaranteed payments 3,007,733,861,862 | 17 | Alternative minimum tax (AMT) items |
| 93 | 7 Stratford Place, mason/needham Ohio/anu 45040-5060 | | 5 | Interest income | | |
| С | IRS center where partnership filed return: | | ľ | 273,600,000,000 | | |
| Ď | Check if this is a publicly traded partnership (PTP) | | 6a | Ordinary dividends | | |
| P | art II Information About the Partner | | 1 | 720,005,000,000 | | |
| E | Partner's SSN or TIN (Do not use TIN of a disregarded entity. See in | structions.) | 6b | Qualified dividends | 18 | Tax-exempt income and |
| | 287848777 | | | \$648,980,905.84 | | nondeductible expenses |
| F | Name, address, city, state, and ZIP code for partner entered in E. See | nstructions. | 6c | Dividend equivalents | | |
| Doi | nald Paul needham | | L | | | |
| 937 | 7 Stratford place, mason/needham ohio/anu 45040-5060 | | 7 | Royalties | | |
| _ | | | . | Not alread to see a see it of a see it flows | | |
| G | ☐ General partner or LLC ☐ Limited partner or other member-manager ☐ Limited partner or other member | LLC | 8 | Net short-term capital gain (loss) | 19 | Distributions |
| H1 | | | 9a | Net long-term capital gain (loss) | 19 | Distributions |
| H2 | ✓ Domestic partner ✓ Foreign partner ✓ If the partner is a disregarded entity (DE), enter the partner's: | | " | rectioning term capital gain (1000) | | |
| | TIN Name | | 9b | Collectibles (28%) gain (loss) | | |
| н | What type of entity is this partner? | | | | 20 | Other information |
| 12 | If this partner is a retirement plan (IRA/SEP/Keogh/etc.), check here | | 9c | Unrecaptured section 1250 gain | | |
| J | Partner's share of profit, loss, and capital (see instructions): | _ | | 410,000,000,000 | | |
| | Beginning Ending | | 10 | Net section 1231 gain (loss) | | |
| | Profit 273,600,000,000 % 262,200,000 | . ,,, | L. | | | |
| | Loss 122,400,000,000 % 122,400,000 | 200 | 11 | Other income (loss) | | |
| | Capital 310,000,000,000 % 720,000,000 | ,000 % | | | | |
| | Check if decrease is due to: Sale or Exchange of partnership interest. See instructions | | | | | |
| K1 | Partner's share of liabilities: | | 12 | Section 179 deduction | 21 | Foreign taxes paid or accrued |
| "' | Beginning Endin | g | - | | | , |
| | Nonrecourse \$ | | 13 | Other deductions | | |
| | Qualified nonrecourse | | | | | |
| | financing \$ | | | | | |
| | ricodatac | ,000,000 | | | | |
| K2 | Check this box if item K1 includes liability amounts from lower-tier partner | | | | | |
| K3 | Check if any of the above liability is subject to guarantees or payment obligations by the partner. See instructions | other . | | | | |
| - | ·· · · · · · · · · · · · · · · · · · · | | 4 | More than one activity for at-risk | | |
| L | Partner's Capital Account Analysis Beginning capital account \$ 310,000 | .000,000 | 23 | More than one activity for passive ee attached statement for add | | |
| | Deginning depiter docount | .000,000 | 3 | e attached statement for auc | JILION | ai information. |
| | cupital contributed during the year | ,000,000 | | | | |
| | Other increase (decrease) (attach explanation) \$ | | <u> </u> | | | |
| | Withdrawals and distributions \$ (|) | ŏ | | | |
| L | Ending capital account \$ 720,000 | ,000,000 | Jse | | | |
| м | Did the partner contribute property with a built-in gain (loss)? | | For IRS Use Only | | | |
| <u>L</u> | Yes No If "Yes," attach statement. See instructions | L. | ĪĒ | | | |
| N | Partner's Share of Net Unrecognized Section 704(c) Gain or | (Loss) | E | | | |
| | Beginning \$ | | | | | |
| | Ending | | 1 | | | |

8949

Sales and Other Dispositions of Capital Assets

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D. Go to www.irs.gov/Form8949 for instructions and the latest information.

OMB No. 1545-0074 2024 Attachment Sequence No. **12A**

Department of the Treasu Internal Revenue Service Name(s) shown on return Donald Paul Needham

Social security number or taxpayer id 287848777

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are generally short-term (see instructions). For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

| or one or more of the boxes, com | plete as many | forms with | the same box o | hecked as you r | need. | |
|----------------------------------|----------------|-------------|-----------------|--------------------------|-------------------------------------|---|
| (A) Short-term transactions | reported on F | orm(s) 1099 | 9-B showing bas | is was reported | to the IRS (see Note above) |) |
| (B) Short-term transactions | reported on F | orm(s) 1099 | 9-B showing bas | sis wasn't report | ed to the IRS | |
| (C) Short-term transactions | not reported t | to you on F | orm 1099-B | | | |
| | | | | | Adjustment, if any, to gain or loss | |

| (a) Description of property | (c) Date sold or | | (d) Proceeds | (e) Cost or other basis See the Note below | If you enter an enter a c | if any, to gain or loss amount in column (g), ode in column (f). varate instructions. | (h) Gain or (loss) Subtract column (e) |
|---|-------------------------------------|--------------------------------|-------------------------------------|--|-------------------------------------|--|---|
| (Example: 100 sh. XYZ Co.) | (Mo., day, yr.) | disposed of (Mo., day, yr.) | (sales price) (see Instructions) | and see Column (e) In the separate Instructions. | (f) Code(s) from Instructions | (g) Amount of adjustment | from column (d) and combine the result with column (g). |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 12/31/2024 | 489,600,000,00 | 4800 | | 489,599,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 12/31/2024 | 86,400,000,000 | 4800 | | 86,399,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 01/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 02/29/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 03/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 04/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 05/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 06/29/2024 | 40,800,067,200 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 07/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 08/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 09/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 10/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 11/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| Purchase Sale value date to purchase public shares XYZ Co. | 12/01/2023 | 12/30/2024 | 40,800,000,000 | 4800 | | 40,799,995,200 | |
| 2 Totals. Add the amounts in column negative amounts). Enter each tot Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box | al here and inc is checked), lir | lude on your ne 2 (if Box B | | | | | |

Note: If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Attachment Sequence No. 12A Form 8949 (2024) Name(s) shown on return. Name and SSN or taxpayer identification no. not required if shown on other side Social security number or taxpayer identification number 287848777 Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check. Part II Long-Term. Transactions involving capital assets you held more than 1 year are generally long-term (see instructions). For short-term transactions, see page 1. Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions). You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need. (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis wasn't reported to the IRS (F) Long-term transactions not reported to you on Form 1099-B Adjustment, if any, to gain or loss f you enter an amount in column (g), enter a code in column (f). See the separate instruction (a)
Description of property
(Example: 100 sh. XYZ Co.) (c) Date sold or ee the Note belo and see Column (in the separate instructions. combine the Trademark Office: Associate title agency;Cash demand nomin 01/06/2023 08/29/2024 720,000,004,80 4.800 720,000,000,000 Trademark Office: Associate title 01/01/2024 08/29/2024 310,000,004,80 310,000,000,000 4,800 agency;Cash demand nominal Trademark Office: Associate title 01/01/2024 08/29/2024 369,564,351,57: 4,800 369,564,346,770 agency; Cash demand nominal Trademark Office: Associate title agency;Cash demand nominal 01/01/2024 12/29/2024 52,794,922,079 4,800 52,794,906,679 Trademark Office: Associate title 01/01/2024 12/29/2024 59,006,076,975 4,800 59,006,072,175 agency; Cash demand nominal Trademark Office: Associate title agency; Cash demand nominal 01/01/2024 12/29/2024 70,000,004,800 4,800 Trademark Office: Associate title agency; Cash demand nominal 01/01/2024 04/30/2024 210,000,004,80 4,800 210,000,000,000 Trademark Office: Associate title agency; Cash demand nominal 01/01/2024 9/29/2024 120,000,004,80 4,800 120,000,000 2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form **8949** (2024)

above is checked), or line 10 (if Box F above is checked)