

BEDFORD J C V CONDO ASSOCIATION INC  
242 BEDFORD J  
WEST PALM BEACH FL 33417-2251



**S 0001 SAV 201008604 (Joint owner: Lori J Crocco)**

Trans Date	Eff Date	Description	Withdrawals	Deposits	Balance
Jan 01		Starting Balance			\$5.12
Jan 31		Closing Date....New Balance			\$5.12

**S 0031 MMKT 200151629 (Joint owner: Lori J Crocco)**

Trans Date	Eff Date	Description	Withdrawals	Deposits	Balance
Jan 01		Starting Balance			\$25,882.74
Jan 03		Withdrawal Check #1018 Tracer 1012787	\$-638.55		\$25,244.19
Jan 17		Withdrawal Transfer to Share 0571	\$-638.55		\$24,605.64
Jan 21		Deposit		\$448.00	\$25,053.64
Jan 21		Deposit		\$2,667.00	\$27,720.64
Jan 23		Withdrawal Check #1019 Tracer 1004594	\$-13,516.07		\$14,204.57
Jan 31		Deposit Annual Percentage Yield Earned: 0.53% For the Period from 01/01 through 01/31.		\$10.04	\$14,214.61
Jan 31		Closing Date....New Balance			\$14,214.61

**Cleared Checks Recap**

Check Number	Date	Amount	Check Number	Date	Amount	Check Number	Date	Amount
1018	Jan 03	\$638.55	1019	Jan 23	\$13,516.07			

**S 0571 LAUNDRY (Joint owner: Lori J Crocco)**

Trans Date	Eff Date	Description	Withdrawals	Deposits	Balance
Jan 01		Starting Balance			\$5,616.35
Jan 17		Deposit		\$60.00	\$5,676.35
Jan 17		Deposit Transfer from Share 0031		\$638.55	\$6,314.90
Jan 31		Closing Date....New Balance			\$6,314.90

**I 1001 12 MONTH CERTIFICATE (Joint owner: Janet Feuer) (Joint owner: Lori J Crocco)**

### 1001 12 MONTH CERTIFICATE (Joint owner: Janet Feuer) (Joint owner: Lori J Crocco) (Continued)

Trans Date	Description	Withdrawals	Deposits	Balance
Jan 01	Starting Balance			\$21,835.27
Jan 05	Deposit Annual Percentage Yield Earned: 5.25% For the Period from 12/05 through 01/04.		\$95.15	\$21,930.42
Jan 06	Deposit Annual Percentage Yield Earned: 2.27% For the Period from 01/05 through 01/05.		\$1.35	\$21,931.77
Jan 06	Withdrawal	\$-21,931.77		\$0.00
Jan 31	Closing Date....New Balance			\$0.00
<b>Cert ID</b>	<b>Matures On</b>	<b>Dividend Rate</b>		
1001	01/05/2026	2.250%		

### 1003 5 MONTH PROMO CERT (Joint owner: Janet Feuer) (Joint owner: Lori J Crocco)

Trans Date	Description	Withdrawals	Deposits	Balance
Jan 01	Starting Balance			\$19,545.91
Jan 11	Deposit Annual Percentage Yield Earned: 4.50% For the Period from 12/11 through 01/10.		\$73.18	\$19,619.09
Jan 31	Closing Date....New Balance			\$19,619.09
<b>Cert ID</b>	<b>Matures On</b>	<b>Dividend Rate</b>		
1003	05/11/2025	4.400%		

### 1004 7 MONTH PROMO CERT (Joint owner: Janet Feuer) (Joint owner: Lori J Crocco)

Trans Date	Description	Withdrawals	Deposits	Balance
Jan 06	Starting Balance			\$0.00
Jan 06	Deposit		\$21,931.77	\$21,931.77
Jan 31	Closing Date....New Balance			\$21,931.77
<b>Cert ID</b>	<b>Matures On</b>	<b>Dividend Rate</b>		
1004	08/06/2025	4.160%		

### YEAR TO DATE DIVIDENDS/INTEREST EARNED

Shares	Dividends/Interest	Penalties	Withholding
0001	\$0.00	\$0.00	\$0.00
0031	\$10.04	\$0.00	\$0.00
0571	\$0.00	\$0.00	\$0.00
1001	\$96.50	\$0.00	\$0.00
1003	\$73.18	\$0.00	\$0.00
1004	\$0.00	\$0.00	\$0.00
<b>Totals</b>	<b>\$179.72</b>	<b>\$0.00</b>	<b>\$0.00</b>

### OVERDRAFT AND RETURNED ITEM FEES

	Total Overdraft Fees		Total Returned Item Fees	
Shares	Total for This Period	Total Year-to-Date	Total for This Period	Total Year-to-Date
S0001	\$0.00	\$0.00	\$0.00	\$0.00

D0031	\$0.00	\$0.00	\$0.00	\$0.00
D0571	\$0.00	\$0.00	\$0.00	\$0.00
C1001	\$0.00	\$0.00	\$0.00	\$0.00
C1003	\$0.00	\$0.00	\$0.00	\$0.00
C1004	\$0.00	\$0.00	\$0.00	\$0.00
Totals	\$0.00	\$0.00	\$0.00	\$0.00

**If you inform the Credit Union immediately, in writing, of any changes of address, your statements won't be delayed, and you won't miss important mail and announcements.**

You may change your address in Online Banking at [ithinkfi.org](http://ithinkfi.org). To change your address by mail, please include a copy of your photo ID, such as a Driver's License, for verification. Individual account numbers are not needed. For name changes, please contact our office. If the address on your ID does not match the address change you've requested, please also include proof of residence, such as a copy of your utility bill. Please print.

**Mail to: Member Services, ITHINKFI, P.O. Box 5090,  
Boca Raton, FL 33431-0890 – or fax to: 561.226.5415**

MEMBER NAME	MEMBER NUMBER	
NEW MAILING ADDRESS	APARTMENT #	
CITY	STATE	ZIP CODE
HOME PHONE NUMBER	CELL PHONE NUMBER	
EMAIL ADDRESS		
MEMBER SIGNATURE	DATE	

**IMPORTANT! COMPLETE, DETACH AND RETURN THIS TOP PORTION TO AUTHORIZE ADDRESS CHANGES!**

[illegible]

**Federally  
Insured by  
NCUA**

**Nationwide: 1.800.888.3900**  
**Boca Raton area 561.266.2100**  
**Atlanta area 770.429.6520**

**Online Banking at [lthinkfl.org](http://lthinkfl.org)**

In accordance with Regulation V and the Fair and Accurate Credit Transactions Act (FACT), this notice is to inform you that we may provide negative information to the Experian, Equifax and/or Transunion Credit Bureaus and/or ChexSystems about you and any joint signers or coborrowers, regarding an insolvency, delinquency, late payment, negative balance, NSF history or default on your account(s) to be recorded in your credit report and financial records.

To balance your checkbook with this statement...

...Review paid checks on the other side by number and check them off in your checkbook. List in the boxes at left any check still outstanding, including those written in a prior statement period. Subtract from your checkbook balance any checks or other paid items which you have not already recorded.

...Check the deposits shown on this statement against those in your checkbook. Be sure to enter in your checkbook any you might have missed. List below any deposits you made which do not appear on the statement. If any of these deposits were made prior to statement date, notify the Credit Union.

...Subtract the service charge(s), if any, from your checkbook balance.

...Complete the form below. The final figure should agree with your checkbook balance. If it does not, see "Hints for finding differences" below.

NEW BALANCE

FROM STATEMENT

3

CHECKBOOK BALANCE

**S**

ADD DEPOSITS NOT SHOWN ON  
STATEMENT

§ \_\_\_\_\_

ADD DEPOSITS, PAYROLLS, DIVIDENDS,  
AND CREDITS NOT ENTERED IN CHECKBOOK

\$ 3

**SUBTRACT TOTAL OF CHECKS NOT PAID  
AND STILL OUTSTANDING**

§ \_\_\_\_\_

**SUBTRACT CHARGES, LOAN PAYMENTS,  
TRANSFERS, AND WITHDRAWALS NOT  
ENTERED IN CHECKBOOK**

**S**

REVISÉD STATEMENT BALANCE

3

REVISÉD CHECKBOOK BALANCE

3

- THESE TOTALS SHOULD AGREE

- Recheck the additions, subtractions and corrections on this form as well as in your checkbook.
- Verify the carry-over of the balance from page to page in your checkbook.
- Make sure you have subtracted any Automated Clearing House (ACH), Bill Pay, debit card and/or service charge(s), if any, from your checkbook balance.
- Compare the amount of each check on your statement with the amount you recorded in your checkbook. Any error or exception should be reported immediately.

If you think your statement is wrong, or if you need more information about a transaction on your statement, contact the branch nearest you or write us on a separate sheet at P.O. Box 5090, Boca Raton, FL 33431-0890 as soon as possible. We must hear from you no later than 60 days after we send you the first statement on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

**Please provide the following in your letter:**

- Your name, Member number and signature
- The dollar amount, date, check number and/or merchant name of the suspected error
- A description of the error and explain why you believe there is an error (or if there is a transaction you don't recognize). Include any receipts or supporting documentation. If you need more information, describe the item you are unsure about.

You do not have to pay any amount in question while we are researching, but you are still obligated to pay any part of your statement that is not in question. While we investigate your inquiries, we cannot report you as delinquent or take any action to collect the amount you question.

Checks and other items received for deposit are subject to the provisions of the Uniform Commercial Code (UCC) or any applicable collection agreement, including our Funds Availability Hold Policy.

**Your interest charges are computed by multiplying the daily periodic rate times the unpaid balance for each day that balance is outstanding.**

Each payment is used first to pay all late charges and then to pay all interest charges due through the date of the payment and the remainder is applied to reduce the unpaid principal balance. The unpaid balance is the principal amount outstanding at the close of business each day after all transactions have been entered.

For more information, please refer to your account disclosures, fee schedules and agreements.

The ITHINK Community Foundation Inc. is a 501(c)3 non-profit organization registered in the state of Florida, Registration #CH47200.  
A COPY OF THE OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE DIVISION OF CONSUMER SERVICES BY CALLING TOLL-FREE (800-435-7352) WITHIN THE STATE. REGISTRATION DOES NOT IMPLY ENDORSEMENT, APPROVAL, OR RECOMMENDATION BY THE STATE.

**Account 0800757185 Basic/Business**

## Deposit Accounts

0001 SAV 201008604  
0031 MMKT 200151629  
0571 LAUNDRY

## Available Balance

\$0.12  
\$17,329.61  
\$6,484.90

## Balance

\$5.12   
\$17,329.61   
\$6,484.90 

## IRA/Certificate Accounts

1003 5 MONTH PROMO CERT  
1004 7 MONTH PROMO CERT

## Maturity Date

05/11/2025  
08/06/2025

## Available Balance

\$19,692.54  
\$22,009.39

## Balance

\$19,692.54   
\$22,009.39 





P.O. Box 5090 Boca Raton, FL 33431-0890

BEDFORD J C V CONDO ASSOCIATION INC  
242 BEDFORD J  
WEST PALM BEACH, FL 33417-2251

### Instructions for Recipient

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

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

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

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

**Payer's Routing Transit Number (RTN).** A payer may include the RTN to identify the bank or financial institution where your account is held.

**Box 1.** Shows taxable interest paid to you during the calendar year by the payer. This does not include interest shown in box 3. May also show the total amount of the credits from clean renewable energy bonds, new clean renewable energy bonds, qualified energy conservation bonds, qualified zone academy bonds, qualified school construction bonds, and build America bonds that must be included in your interest income. These amounts were treated as paid to you during the calendar year on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912. See the instructions above for a taxable covered security acquired at a premium.

**Box 2.** Shows interest or principal forfeited because of early withdrawal of time savings. You may deduct this amount to figure your adjusted gross income on your income tax return. See the Instructions for Form 1040 to see where to take the deduction.

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

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

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

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

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

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

**Box 9.** Shows tax-exempt interest subject to the alternative minimum tax. This amount is included in box 8. See the Instructions for Form 6251. See the instructions above for a tax-exempt covered security acquired at a premium.

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

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

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

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

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

**Boxes 15-17.** State tax withheld reporting boxes.

**Nominees.** If this form includes amounts belonging to another person(s), you are considered a nominee recipient. Complete a Form 1099-INT for each of the other owners showing the income allocable to each. File Copy A of the form with the IRS. Furnish Copy B to each owner. List yourself as the "payer" and the other owner(s) as the "recipient." File Form(s) 1099-INT with Form 1096 with the Internal Revenue Service Center for your area. On Form 1096, list yourself as the "filer." A spouse is not required to file a nominee return to show amounts owned by the other spouse.

**Future developments.** For the latest information about developments related to Form 1099-INT and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/Form1099INT](http://www.irs.gov/Form1099INT).

**Free File Program.** Go to [www.irs.gov/FreeFile](http://www.irs.gov/FreeFile) to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. iTHINK FINANCIAL 1000 NW 17TH AVENUE DELRAY BEACH, FL 33445 (800) 873-5100		Payer's RTN (optional)	OMB No. 1545-0112 Form 1099-INT (Rev. January 2024) For calendar year <u>2024</u>		<b>Interest Income</b>	
PAYER'S TIN 59-1286880		1 Interest income \$ 2,088.20	3 Interest on U.S. Savings Bonds and Treasury obligations \$ 0.00			
RECIPIENT'S name, street address (including apt. no.) city or town, state or province, country, ZIP or foreign postal code BEDFORD J C V CONDO ASSOCIATION INC 242 BEDFORD J WEST PALM BEACH, FL 33417-2251		2 Early withdrawal penalty \$ 0.00	5 Investment expenses \$ 0.00		<b>Copy B For Recipient</b>  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.	
RECIPIENT'S TIN XXX-XX-2688		4 Federal income tax withheld \$ 0.00	7 Foreign country or U.S. territory			
FATCA filing requirement <input type="checkbox"/>		6 Foreign tax paid \$ 0.00	9 Specified private activity bond interest \$ 0.00			
Account number (see instructions)		8 Tax-exempt interest \$ 0.00	11 Bond premium \$			
Total interest for all non-IRA iTHINK accts		10 Market discount \$	13 Bond premium on tax-exempt bond \$			
		12 Bond premium on Treas. obligations \$	14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State identification no.	17 State tax withheld \$ 0.00