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		AREA RESERVE	
2022 Form 2G			
XXXXXXXXXXXXXX	F	OR 2-D BARCOD	
Grantor's/Owner's Share of a C	Grantor-Type Trust		
5 Year beginning XXXXXXXX Ending	VVVVVVV		
7			
NAMEOFGRANTORBENE	FICIARYXXXXXXXXXXXX GRANT	ORTONO	
LEGALDOMICILEOFGR		ONIDHO	
MAILINGADDRESSOFG	RANTORX CTTYTOWNPOSTOFFTC	EXXXXXX ST ZIP+FOU	JRX
NAMEOFFIDUCIARYXX	XXXXXXX		
TITLEOFFIDUCIARYX	XXXXXXX		
NAMEOFENTITYXXXXX	XXXXXXX ENTITYIDNOX Select type	e of ID no X FID X SSN/ITIN	
INCAREOFXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
MAILINGADDRESSOFF	IDUCIAR CITYTOWNPOSTOFFIC	EXXXXXX ST ZIP+FOU	JRX
Company account number XXX	XXXXXXXX Date entity created MMDDYY irantor-type trust X Other X Fe y trust X Final 2G return X A	YY	
Fill in all that apply: X G	irantor-type trust X Other X Fe	ederal amendment	
Charitable remainder annuity	y trust X Final 2G return X A	mended return due to IRS BBA Partner	ship Audit
Charitable remainder unitrus	st X Amended return X F	iling Schedule TDS	
X Pooled income fund			
1. Dividends		1	XXXXXXXXXXXXX
2. Interest from corporate bonds or		2	
3. Non-Massachusetts state and mu	unicipal bond interest	3	
4. Other interest income		4	
5. Interest from U.S. obligations		5	~~~~~~~~~~
		6	
7. Short-term capital losses	· I deploye that to the best of my knowledge and bel	7 -	XXXXXXXXXXXXXXX -XXXXXXXXXXXXXXXXX
7. Short-term capital losses SIGN HERE. Under penalties of perjury	r, I declare that to the best of my knowledge and bel	7 -	
7. Short-term capital losses SIGN HERE. Under penalties of perjury		ief this return and enclosures are tru	e, correct and complete.
7. Short-term capital losses SIGN HERE. Under penalties of perjury Signature of fiduciary	Date Print paid preparer's na	ief this return and enclosures are tru me Paid preparer	e, correct and complete. s SSN or PTIN
7. Short-term capital losses SIGN HERE. Under penalties of perjury Signature of fiduciary	Date Print paid preparer's nat	ief this return and enclosures are tru me Paid preparer' XXXXXX	e, correct and complete. s SSN or PTIN XXXX
7. Short-term capital losses SIGN HERE. Under penalties of perjury Signature of fiduciary Title	Date Print paid preparer's na	ief this return and enclosures are tru me Paid preparer XXXXXX Paid preparer	e, correct and complete. s SSN or PTIN XXXX s EIN
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7. Short-term capital losses SIGN HERE. Under penalties of perjury Signature of fiduciary Title	Date Print paid preparer's nat XXXXXXXX Paid preparer's phone	re Date	e, correct and complete. SSN or PTIN XXXX EIN XXXX Check if self-employed
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1		AREA RESERVE	D
2 2	022 Form 2G, pg. 2		
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G	rantor's/Owner's Share of a Grantor-Type Trust		
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3 N		ΝΤΟΡΤΟΝΟ	
• N	AMETITLEOFGRANTORBENEFICIARYXXXXXX GRA AMEOFENTITYXXXXXXXXXXX ENTITYIDNOX		
8.	Gain on the sale, exchange or involuntary conversion of property used in a trade or t		
2	one year or less		XXXXXXXXXXXXX
9.	Loss on the sale, exchange or involuntary conversion of property used in a trade or t		
l	one year or less	9	
	Long-term capital gains or losses	10	
11.		11	
12.		12	
13.		13	
14. 15.		14	
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16.		16	
17.		17	
18.		18	
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21.		21	
22.		itrust withholding 23	
23.	Nonresident withholding and pooled income fund/charitable remainder annuity or un	0	
24.			XXXXXXXXXXXXX
) 1 25.	Form 1, line 38c or Form 1-NR/PY, line 42c Amount of ch 63D Entity-Level Tax paid by electing entity on behalf of this grantor or	beneficiary 25	XXXXXXXXXXXXXX
25.	Total paid XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	NO 23	
	BE SURE TO SIGN RETURN (ON PAGE 1	
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		vvvvvvvvvvvvvvvv	
	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	