APPLICATION FOR RENTAL

Rental Application for **The Copper**

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APPLICANT INFORMATION

LAST NAME	FIRST NAME	M.I.	SUFFIX
Nguyen	ToTran		

SSN	BIRTH DATE	PHONE - TYPE
-**-*	1/10/1979	(804) 214 - 6440 - Mobile

EMAIL
totran.t.nguyen@gmail.com

CURRENT ADDRESS

STREET ADDRESS	CITY	STATE	ZIP
8601 Lonepine Road	Richmond	VA	23294

MOVE IN DATE	MOVE OUT DATE	MONTHLY RENT
	current	$0.00 / Mo.

EMPLOYMENT & INCOME INFORMATION

OCCUPATION	EMPLOYER/COMPANY
Senior Consultant	Triad Consulting Group

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
Lisa Nagorny	(703) 459 - 5339	$165,000.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
68 Harrison Avenue Suite 605	Boston	MA	02111

OCCUPATION	EMPLOYER/COMPANY
Senior Consultant	Triad Consulting Group

SUPERVISOR	SUPERVISOR PHONE	SALARY	START DATE
Lisa Nagorny	(703) 459 - 5339	$24,750.00/Yr.	

EMPLOYER ADDRESS	CITY	STATE	ZIP
68 Harrison Avenue Suite 605	Boston	MA	02111

BACKGROUND INFORMATION

Have you ever filed for bankruptcy?	Have you ever willfully refused to pay rent when due?
NO	NO

Have you ever been evicted from a tenancy or left owing money?	Have you ever been convicted of a crime?
NO	NO

SUPPLEMENTAL QUESTIONS

Will the tenant be receiving stove knob covers from property?

☒ Yes, I want stove knob covers or replacement stove knob covers for my stove, even though I do not have a child under age six residing in my apartment.

Window Guards:

☒ No children 10 years of age or younger live in my apartment

Were you referred by a broker?

NO

I (we) have seen the actual apartment for which I (we) are applying?:

NO

Initials: T.N. 8B4B9160

NEW YORK CITY TENANT FAIR CHANCE ACT

Pursuant to the laws of the federal government, New York State, and NYC Admin. Code § 20-807 et seq., we are required to provide you with the following disclosure:

1) The application information you provide will be used by this community's owner or designated agent (the "Owner") to obtain a tenant screening report on you, and the Owner may use this report to determine your suitability for housing.
2) If your application is denied or other adverse action is taken against you on the basis of information contained in the tenant screening report, the Owner must tell you that such action was taken and provide you with the contact information of the screening company that provided the tenant screening report.
3) You may obtain a free copy of the report and dispute inaccurate or incorrect information on the report directly with the screening company at: Attn: On-Site c/o RealPage, 2201 Lakeside Boulevard, Richardson, TX 75082; 1-877-222-0384; www.on-site.com/renter-relations/.
4) You are entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report which can be obtained from www.annualcreditreport.com.

APPLICATION CONSENT

I hereby warrant that all statements set forth above are true.

I understand that a consumer report and/or an investigative consumer report may be requested in connection with my prospective or continuing housing or guarantor application with **The Copper** through RP On-Site LLC (On-Site). I understand that these reports may include information concerning my character, employment and income verification, general reputation, personal characteristics, public records information, criminal records information, education, qualifications, motor vehicle record, mode of living, credit and indebtedness information, and any other information which may reflect upon my potential for tenancy or guarantor status gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information.

I understand that **The Copper** may require income and employment verification in connection with my application. I further understand that income and employment verification require access to my employment, income, and payroll related information. I authorize and consent to the access to, use, and release of such information by On-Site, Trans Union LLC, and other applicable credit bureaus for the purpose of providing the verification services in relation to my application and during the course of any ongoing lease obligation arising from such application.

I understand that if an investigative consumer report is requested about me, I have the right to make a written request to **The Copper**, within a reasonable period of time, for complete and accurate disclosure of the nature and scope of the investigation requested.

I consent to the delivery of all notices or disclosures required by law via any medium so chosen by **The Copper** or On-Site, including but not limited to email or other electronic transmission. I understand that all notices shall be deemed received upon being sent.

By submitting this application, I certify that I have read and fully understand the disclosures and my rights detailed above and authorize On-Site to obtain, for the purpose of determining my eligibility for initial or continued tenancy or guarantor status, a consumer report and/or investigative consumer report and to disclose all information obtained by On-Site to **The Copper**, its affiliates, and assigns now and in the future. I also certify that I have read and fully understand my rights under the FCRA available at https://www.on-site.com/resources/consent/fcraDisclosuresConsent.pdf.

I understand that, upon written request, I will be informed whether or not a consumer report or an investigative consumer report was requested and, if such a report was requested, informed of the name and address of the credit reporting agency that furnished the report. With regard to "investigative consumer reports", I further understand that when I receive the name and address of the consumer reporting agency, I may request a copy of such report by contacting such agency. I acknowledge that I have received and read Article 23-A of the New York Correction Law (https://www.on-site.com/resources/consent/correctionLawArticle23a.pdf)

☒ *Application consent was digitally accepted by ToTran Nguyen*

Signed by ToTran Nguyen
Sat Jun 28 2025 11:15:48 AM EDT
Key: 8B4B9160; IP Address: 146.75.236.1

ToTran Nguyen *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee - Charge Details			
Name on Card	**Account Number**	**Reference Number**	**Authorized**
ToTran Nguyen	XXXXXXXXXXXX2679	15961609	$21.50
This card has been authorized for the amount above and will be charged when the application is processed.			

Initials: T.N. 8B4B9160

California Required Notices

This report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in CA Civil Code Section 1786.26.

This report was prepared using software provided by RP On-Site LLC, which can be contacted at: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Avisos obligatorios en el estado de California

El presente informe no garantiza la exactitud ni la veracidad de la información con respecto al tema de investigación, sino únicamente que es una copia exacta de los registros públicos y es posible que la información generada como consecuencia del robo de identidad, incluidos los registros de antecedentes delictivos, se haya asociado por error con el consumidor objeto del presente informe.

Una agencia de investigación de verificación de crédito proporcionará al consumidor que desee obtener una copia de un informe o que solicite la revisión de un archivo un aviso por escrito en inglés y español, escrito en un lenguaje simple y claro, que establezca los términos y condiciones de su derecho a recibir todas las divulgaciones conforme a la Sección 1786.26 del Código Civil de California.

Este informe se preparo con el software proporcionado pro RP On-Site LLC, que puede contractarse en: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Rental Report for ToTran Nguyen

The property's screening criteria result	
PENDING	There is screening pending and no overall recommendation yet. Any scores are preliminary, and do not necessarily reflect the final recommendation.

Score for ToTran Nguyen: 841

		Importance	Result
AI Score		Pass/Fail	
No Credit		Pass/Conditional	
Total annual income to rent ratio exceeds 40.0		Pass/Fail	PENDING
May have been through a bankruptcy		Pass/Fail	
No unpaid rental collections		Pass/Fail	
Employment verification must not be Verified False		Pass/Fail	PENDING
Criminal and Other Public Records: Felony Convictions		Pass/Fail	
Total Considered Felony Convictions	None	Pass/Fail	
Alcohol	None ever	Pass/Fail	
Bad Check	None ever	Pass/Fail	
Criminal Other	None ever	Pass/Fail	
Drug Manufacture Distribution	None ever	Pass/Fail	
Drug Marijuana Use	None ever	Pass/Fail	
Drug Meth Manufacture	None ever	Pass/Fail	
Drug Use	None ever	Pass/Fail	
Fraud	None ever	Pass/Fail	

Government Obstruction	None ever	Pass/Fail	
Kidnapping	None ever	Pass/Fail	
Property Destruction	None ever	Pass/Fail	
Property Other	None ever	Pass/Fail	
Property Theft	None ever	Pass/Fail	
Prostitution	None ever	Pass/Fail	
Sex Offense Coerced	None ever	Pass/Fail	
Sex Offense Willful	None ever	Pass/Fail	
Society Other	None ever	Pass/Fail	
Violent Fatal	None ever	Pass/Fail	
Violent Non Fatal	None ever	Pass/Fail	
Weapons	None ever	Pass/Fail	
Wildlife	None ever	Pass/Fail	
Criminal and Other Public Records: Misdemeanor Convictions		Pass/Fail	
Total Considered Misdemeanor Convictions	None	Pass/Fail	
Alcohol	None ever	Pass/Fail	
Bad Check	None ever	Pass/Fail	
Criminal Other	None ever	Pass/Fail	
Drug Manufacture Distribution	None ever	Pass/Fail	
Drug Marijuana Use	None ever	Pass/Fail	
Drug Meth Manufacture	None ever	Pass/Fail	
Drug Use	None ever	Pass/Fail	
Fraud	None ever	Pass/Fail	
Government Obstruction	None ever	Pass/Fail	
Kidnapping	None ever	Pass/Fail	
Property Destruction	None ever	Pass/Fail	
Property Other	None ever	Pass/Fail	
Property Theft	None ever	Pass/Fail	
Prostitution	None ever	Pass/Fail	
Sex Offense Coerced	None ever	Pass/Fail	
Sex Offense Willful	None ever	Pass/Fail	
Society Other	None ever	Pass/Fail	
Violent Fatal	None ever	Pass/Fail	
Violent Non Fatal	None ever	Pass/Fail	
Weapons	None ever	Pass/Fail	
Wildlife	None ever	Pass/Fail	
Is not a registered sex offender		Pass/Fail	

Credit Quick Summary	
Total annual income (reported by Applicant)	$189,750.00
Total **verified** annual income	Pending
Total **verified** combined annual income to rent ratio	Pending (based on rent of $4,280.58)
Total number of accounts	6
Accounts with no late payments	6 (0 unpaid past due)
Accounts paid 30-59 days past due	0 (0 unpaid past due)
Accounts paid 60-89 days past due	0 (0 unpaid past due)
Accounts paid more than 90 days past due	0 (0 unpaid past due)
Total outstanding balance	$2,507.00 ($0.00 past due)
Outstanding revolving debt	$2,507.00 (6% of limit) ($0.00 past due)
Outstanding loan balance	$0.00 ($0.00 past due)
Bankruptcies, foreclosures, and legal items	0
Collection total balance (includes past due)	$0.00
Rental History records found	0

Identity	From Application	From Equifax
Name:	ToTran Nguyen	TOTRAN T. NGUYEN
SSN:	***-**-****	***-**-****
Birth Date:	1/**/1979	1/**/1979

Addresses	From Application	From Equifax
	8601 Lonepine Road Richmond, VA 23294 - US	8601 LONEPINE RD. RICHMOND, VA 23294 (Applicant) Reported 6/2025 834 BELMONT AVE. CHARLOTTESVILLE, VA 22902 (Applicant) Reported 1/2017 600 BRANDON AVE. CHARLOTTESVILLE, VA 22903 (Applicant) Reported 7/2011 284 DRIGGS AVE. 2R BROOKLYN, NY 11222 (Applicant) Reported 6/2010

Employment	From Application	From Equifax
Applicant:	Senior Consultant Triad Consulting Group $165,000.00/Yr. Senior Consultant Triad Consulting Group $24,750.00/Yr. Total annual Income: $189,750.00	

Employment Verifications

From RealPage

Requested For ToTran Nguyen Requested Date 6/28/2025	**Employer** Triad Consulting Group	**Position Held** Senior Consultant	**Annual Salary** $165,000.00	**Supervisor** Lisa Nagorny (703) 459 - 5339
	Results Pending			

Requested For ToTran Nguyen Requested Date 6/28/2025	**Employer** Triad Consulting Group	**Position Held** Senior Consultant	**Annual Salary** $24,750.00	**Supervisor** Lisa Nagorny (703) 459 - 5339
	Results Pending			

Criminal and Other Public Records

Requested For	**Period Searched**	**Requested**	**Returned**
ToTran Nguyen	6/28/2018 - 6/28/2025	6/28/2025	6/28/2025

Results
No Records Found

National Sex Offender Registry History

Requested For	**Date Requested**	**Date Returned**
ToTran Nguyen	6/28/2025	6/28/2025

Results
No Records Found

Restricted Person Search

Requested For	**Requested**	**Returned**
ToTran Nguyen	6/28/2025	6/28/2025

Results
No Records Found

Risk Models

From RealPage

Risk Model Name	**Score**	**Score Factors**
RealPage AI Score (Applicant)	841	Tradeline scoring Debt-to-income ratio Credit Score Rental Payment History

Description
RealPage AI Score uses machine-learning and data patterns in credit score, debt/liability types, trade lines, rental payment history, and renter behavior to achieve reduced bad debt. The RealPage AI Score range is between 1 and 1000 (the higher the score, the less risky the consumer).

From Equifax

Risk Model Name	**Score**	**Score Factors**
Credit Score (Applicant)	791	You have either very few loans or too many loans with recent delinquencies Balances on bankcard or revolving accounts too high compared to credit limits Lack of sufficient credit history on bankcard or revolving accounts Lack of sufficient relevant first mortgage account information

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	**Opened**	**Last Active**	**30-59**	**60-89**	**90+**	**Past Due**	**Balance**
JPMCB CARD SERVICES (Applicant)	4/2010	4/2025					$2,507.00

Monthly Payment	**High Credit**	**Type**	**Comments**
$40.00	$5,994.00	REVOLVING	Rate/Status 1: Pays account as agreed

Payment History

5/25		3/25		1/25		11/24		9/24		7/24		5/24		3/24		1/24		11/23		9/23		7/23	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
AMERICAN EDUCATION S (Applicant)	9/2005	6/2024					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$37,907.00	INSTALLMENT	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
7/24		5/24		3/24		1/24		11/23		9/23		7/23		5/23		3/23		1/23		11/22		9/22	

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
SYNCB/BANANA REPUBLI (Applicant)	2/2000	7/2006					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$672.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
SYNCB/LOWES (Applicant)	3/2007	3/2007					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$488.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
SYNCB/BANANA REP DC (Applicant)	7/2010	8/2010					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$75.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
AMERICAN EXPRESS (Applicant)	3/1998						$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$0.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6/25		4/25		2/25		12/24		10/24		8/24		6/24		4/24		2/24		12/23		10/23		8/23	

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to** www.consumerfinance.gov/learnmore **or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

  CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

  You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

  As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

  A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
(800) 685-1111
https://www.freeze.equifax.com

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
(888) 397-3742
https://www.experian.com/freeze/center.html

TransUnion LLC
P.O. Box 2000
Chester, PA 19022-2000
(888) 909-8872
www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:

1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.

We the People

Of the United States,
in Order to form a more perfect Union,
establish Justice, insure domestic Tranquility,
provide for the common defence,
promote the general Welfare, and secure
the Blessings of Liberty to ourselves and
our Posterity, do ordain and establish this
Constitution for the United States of America.

To Tran Nguyen

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

3

PASSPORT
PASSEPORT
PASAPORTE

USA

UNITED STATES OF AMERICA

Type / Type / Tipo: P
Code / Code / Codigo: USA
Passport No. / No. du Passeport / No. de Pasaporte: 566055762

Surname / Nom / Apellidos
NGUYEN

Given Names / Prénoms / Nombres
TO TRAN THI

Nationality / Nationalité / Nacionalidad
UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento
10 Jan 1979

Place of birth / Lieu de naissance / Lugar de nacimiento
VIETNAM

Sex / Sexe / Sexo
F

Date of issue / Date de délivrance / Fecha de expedición
25 Apr 2018

Authority / Autorité / Autoridad
United States
Department of State

Date of expiration / Date d'expiration / Fecha de caducidad
24 Apr 2028

Endorsements / Mentions Spéciales / Anotaciones
SEE PAGE 51

USA

P<USANGUYEN<<TO<TRAN<THI<<<<<<<<<<<<<<<<<<<<
5660557628USA7901106F2804246715909613<474886

June 18, 2025

Dear ToTran Nguyen,

We are absolutely thrilled to extend you an offer of employment at Triad Consulting Group as our Senior Consultant, effective July 7, 2025. It has been an absolute delight to get to know you through our conversations as we have explored you joining Triad in this capacity.

We can't wait to experience the impact we know you will have on Triad and our team, as you help us deepen and grow our client relationships. We're confident in the strong foundation of knowledge, skills, and curiosity you bring and your ability to contribute meaningfully across all aspects of our business. From managing and strengthening client partnerships, to shaping proposals and landing new work, to helping evolve Triad in this phase of our journey, we know you'll be an integral part of what's ahead. Needless to say, we are so excited for the work we'll do together and the chance to call you our colleague.

The package for this position is:

- Annual base salary of $165,000.00 per year(paid monthly), effective on your start date.

- Annual performance-based target bonus of 15% of your base salary. The actual bonus amount will be determined based on a combination of your performance and Triad's performance as a firm.

- The following benefits, including but not limited to:
  - *Profit sharing of 0.5%* of the annual profit pool, paid out at the end of the calendar year in the December payroll run. You must be employed by Triad on the day of that the profit share is paid out to be eligible for and receive the profit share amount.
  - *Health insurance,* for which 100% of the premium is paid by Triad. Triad will also contribute $1,500 annually to an HSA account. Should you choose healthcare

coverage outside of Triad (e.g., electing coverage on a partner's plan), Triad's current policy is to reimburse the amount of the premium that is your partner's responsibility to pay, not to exceed the amount that the Triad supplied plan would cost. Note that this reimbursement is paid as taxable income.

- *Vesting in our company-wide 401(k) retirement plan,* with a yearly company contribution of around 4% of your annual salary. The exact amount (which in some years may be more than 4%) is determined through our year-end financial process conjunction with our retirement plan provider. The company contribution does not require an employee match. There is a 3-month waiting period to participate in Triad's 401(k) plan, so you will be eligible to participate starting on October 7, 2025.
- *A $125/month reimbursement for home internet and cell phone plan expenses,* and reimbursement of other basic home office supplies (external monitor, stationary, etc). Triad will also supply you with a laptop computer.
- *Unlimited paid time off* to encourage rest and rejuvenation, alongside 13 paid holidays and office closure the last week in December.
- *An annual professional development stipend* of $1,000 towards professional development each year.

In your role as Senior Consultant, your responsibilities will include, but are not limited to:

- Leading and supporting client engagements of various forms, working in partnership with clients and Triad's team, including Triad's Partners and other Consultants, to develop tailored programs from the diagnostic through delivery and evaluation phase. Engagements will typically include the design and delivery of learning workshops; leading team interventions; and facilitating mediations.
- Facilitating workshops and team sessions both in remote and in-person settings.
- Supporting business development activities, including responding to inbound requests, undertaking research to support client development efforts, drafting proposals, participating in pitches and contributing to Triad's sales processes.
- Managing operational aspects of client engagements, including contracting, pricing, and managing projects day-to-day, in collaboration with our Operations and Support Team staff.

- As Triad's needs evolve, and as capacity and priorities allow, contributing to Triad's ongoing IP development efforts, such as developing new content and methodologies as part of client engagements and/or contributing to select thought leadership and research efforts.
- In all that you do as a member of Triad's team, fostering collaborative working relationships with team members, living Triad's values, and supporting the development and growth of others.

The relative balance of these responsibilities and duties will vary based on Triad's needs and priorities, the volume of client work, your strengths & interests, and the areas in which you are growing & developing depth-of-experience. Early on, we look forward to supporting you and staying in close communication on your "portfolio" of work as you become steeped in Triad's business, clients, content & methodologies, and our pedagogical approach.

This role is a remote role (based in the continental US). Your regular work week is a 40-hour schedule Monday to Friday, in your time zone, with flexibility in how you arrange your week. We have a flexible work policy to support team members in balancing work with other life commitments, and to facilitate effective collaboration and co-working habits across the team. As this role is client facing, there will be times when you will be required to be responsive to work matters outside of the standard workday. You will also need to travel periodically in support of client programs (variable) and for in-person team meetings (e.g., 2-3 days per quarter).

Finally, by signing this letter, you confirm with Triad Consulting Group that you are under no contractural or other legal obligations that would prohibit you from performing duties with Triad. You also agree to execute any additional agreements at the start of your employment, including but not limited to an employment agreement, non-disclosure agreement, and an acknowledgement of Triad's employee handbook.

We would be delighted if you accepted this offer of employment, which is contingent upon successful completion of a background check. If all is agreeable, please sign. Should you have any questions or wish to discuss any part of this offer, you can reach me at 917-544-1899 or Lisa at 703-459-5339.

Warmly,
By: Julie Okada
(Signature)
Name: Julie Okada
Title: CEO

ACCEPTED AND AGREED:
ToTran Nguyen
(PRINT EMPLOYEE NAME)
ToTran Nguyen
(Signature)
June 18, 2025
Date
Anticipated Start Date: July 7, 2025

Electronic Filing Instructions for your 2024 Federal Tax Return

Important: Your taxes are not finished until all required steps are completed.

ToTran Nguyen
8601 Lonepine Road
Richmond, VA 23294

Balance Due/ Refund	Your federal tax return (Form 1040) shows that you have no balance due nor a refund due to you: DO NOT mail a payment or expect to receive a refund from the Internal Revenue Service.
What You Need to Keep	Your Electronic Filing Instructions (this form) A copy of your federal return

2024 Federal Tax Return Summary	Adjusted Gross Income	$	12,609.00
	Taxable Income	$	0.00
	Total Tax	$	0.00
	No Refund or Amount Due	$	0.00
	Effective Tax Rate		0.00%

Form **1040** Department of the Treasury—Internal Revenue Service
U.S. Individual Income Tax Return **2024**
OMB No. 1545-0074 IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 2024, or other tax year beginning ________, 2024, ending ________, 20____ See separate instructions.

Your first name and middle initial	Last name	Your social security number
ToTran	Nguyen	226 21 2917
If joint return, spouse's first name and middle initial	Last name	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions.	Apt. no.
8601 Lonepine Road	

City, town, or post office. If you have a foreign address, also complete spaces below.	State	ZIP code
Richmond	VA	23294

Foreign country name	Foreign province/state/county	Foreign postal code

Presidential Election Campaign Check here if you, or your spouse if filing jointly, want $3 to go to this fund. Checking a box below will not change your tax or refund. ☐ You ☐ Spouse

Filing Status
Check only one box.

- ☒ Single
- ☐ Married filing jointly (even if only one had income)
- ☐ Married filing separately (MFS)
- ☐ Head of household (HOH)
- ☐ Qualifying surviving spouse (QSS)

If you checked the MFS box, enter the name of your spouse. If you checked the HOH or QSS box, enter the child's name if the qualifying person is a child but not your dependent: ________

☐ If treating a nonresident alien or dual-status alien spouse as a U.S. resident for the entire tax year, check the box and enter their name (see instructions and attach statement if required): ________

Digital Assets At any time during 2024, did you: (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.) ☐ Yes ☒ No

Standard Deduction **Someone can claim:** ☐ You as a dependent ☐ Your spouse as a dependent
☐ Spouse itemizes on a separate return or you were a dual-status alien

Age/Blindness **You:** ☐ Were born before January 2, 1960 ☐ Are blind **Spouse:** ☐ Was born before January 2, 1960 ☐ Is blind

Dependents (see instructions):
If more than four dependents, see instructions and check here ☐

(1) First name Last name	(2) Social security number	(3) Relationship to you	(4) Check the box if qualifies for (see instructions): Child tax credit	Credit for other dependents
			☐	☐
			☐	☐
			☐	☐
			☐	☐

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.
If you did not get a Form W-2, see instructions.
Attach Sch. B if required.

Standard Deduction for—
- Single or Married filing separately, $14,600
- Married filing jointly or Qualifying surviving spouse, $29,200
- Head of household, $21,900
- If you checked any box under *Standard Deduction*, see instructions.

Line	Description			Line	Amount
1a	Total amount from Form(s) W-2, box 1 (see instructions)			1a	
b	Household employee wages not reported on Form(s) W-2			1b	
c	Tip income not reported on line 1a (see instructions)			1c	
d	Medicaid waiver payments not reported on Form(s) W-2 (see instructions)			1d	
e	Taxable dependent care benefits from Form 2441, line 26			1e	
f	Employer-provided adoption benefits from Form 8839, line 29			1f	
g	Wages from Form 8919, line 6			1g	
h	Other earned income (see instructions)			1h	
i	Nontaxable combat pay election (see instructions)	1i			
z	Add lines 1a through 1h			1z	
2a	Tax-exempt interest	2a	b Taxable interest	2b	259.
3a	Qualified dividends	3a	b Ordinary dividends	3b	
4a	IRA distributions	4a	b Taxable amount	4b	
5a	Pensions and annuities	5a	b Taxable amount	5b	
6a	Social security benefits	6a	b Taxable amount	6b	
c	If you elect to use the lump-sum election method, check here (see instructions) ☐				
7	Capital gain or (loss). Attach Schedule D if required. If not required, check here ☐			7	
8	Additional income from Schedule 1, line 10			8	12,357.
9	Add lines 1z, 2b, 3b, 4b, 5b, 6b, 7, and 8. This is your **total income**			9	12,616.
10	Adjustments to income from Schedule 1, line 26			10	7.
11	Subtract line 10 from line 9. This is your **adjusted gross income**			11	12,609.
12	**Standard deduction or itemized deductions** (from Schedule A)			12	14,600.
13	Qualified business income deduction from Form 8995 or Form 8995-A			13	
14	Add lines 12 and 13			14	14,600.
15	Subtract line 14 from line 11. If zero or less, enter -0-. This is your **taxable income**			15	0.

Tax and Credits

16	**Tax** (see instructions). Check if any from Form(s): 1 ☐ 8814 2 ☐ 4972 3 ☐	16	0.
17	Amount from Schedule 2, line 3	17	
18	Add lines 16 and 17	18	0.
19	Child tax credit or credit for other dependents from Schedule 8812	19	
20	Amount from Schedule 3, line 8	20	
21	Add lines 19 and 20	21	
22	Subtract line 21 from line 18. If zero or less, enter -0-	22	0.
23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	0.
24	Add lines 22 and 23. This is your **total tax**	24	0.

Payments

25	Federal income tax withheld from:				
a	Form(s) W-2	25a			
b	Form(s) 1099	25b			
c	Other forms (see instructions)	25c			
d	Add lines 25a through 25c			25d	
26	2024 estimated tax payments and amount applied from 2023 return			26	
27	Earned income credit (EIC) No	27			
28	Additional child tax credit from Schedule 8812	28			
29	American opportunity credit from Form 8863, line 8	29			
30	Reserved for future use	30			
31	Amount from Schedule 3, line 15	31			
32	Add lines 27, 28, 29, and 31. These are your **total other payments and refundable credits**			32	
33	Add lines 25d, 26, and 32. These are your **total payments**			33	

If you have a qualifying child, attach Sch. EIC.

Refund

34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you **overpaid**			34	
35a	Amount of line 34 you want **refunded to you**. If Form 8888 is attached, check here ☐			35a	
b	Routing number X X X X X X X X X c Type: ☐ Checking ☐ Savings				
d	Account number X X X X X X X X X X X X X X X X X				
36	Amount of line 34 you want **applied to your 2025 estimated tax**	36			

Direct deposit? See instructions.

Amount You Owe

37	Subtract line 33 from line 24. This is the **amount you owe**. For details on how to pay, go to *www.irs.gov/Payments* or see instructions			37	0.
38	Estimated tax penalty (see instructions)	38			

Third Party Designee

Do you want to allow another person to discuss this return with the IRS? See instructions ☐ **Yes.** Complete below. ☒ **No**

Designee's name | Phone no. | Personal identification number (PIN)

Sign Here

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.)
		researcher	
Spouse's signature. If a joint return, **both** must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.)
Phone no. (804)214-6440	Email address		

Joint return? See instructions. Keep a copy for your records.

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: ☐ Self-employed
Firm's name Self-Prepared			Phone no.	
Firm's address			Firm's EIN	

SCHEDULE 1 (Form 1040)

Department of the Treasury
Internal Revenue Service

Additional Income and Adjustments to Income

Attach to Form 1040, 1040-SR, or 1040-NR.

Go to *www.irs.gov/Form1040* for instructions and the latest information.

OMB No. 1545-0074

2024

Attachment Sequence No. **01**

Name(s) shown on Form 1040, 1040-SR, or 1040-NR	Your social security number
ToTran Nguyen	226-21-2917

For 2024, enter the amount reported to you on Form(s) 1099-K that was included in error or for personal items sold at a loss . . . .

Note: The remaining amounts reported to you on Form(s) 1099-K should be reported elsewhere on your return depending on the nature of the transaction. See *www.irs.gov/1099k*.

Part I Additional Income

1	Taxable refunds, credits, or offsets of state and local income taxes			1	
2a	Alimony received			2a	
b	Date of original divorce or separation agreement (see instructions):				
3	Business income or (loss). Attach Schedule C			3	
4	Other gains or (losses). Attach Form 4797			4	
5	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E			5	
6	Farm income or (loss). Attach Schedule F			6	
7	Unemployment compensation			7	
8	Other income:				
a	Net operating loss	8a	( )		
b	Gambling	8b			
c	Cancellation of debt	8c			
d	Foreign earned income exclusion from Form 2555	8d	( )		
e	Income from Form 8853	8e			
f	Income from Form 8889	8f			
g	Alaska Permanent Fund dividends	8g			
h	Jury duty pay	8h			
i	Prizes and awards	8i			
j	Activity not engaged in for profit income	8j			
k	Stock options	8k			
l	Income from the rental of personal property if you engaged in the rental for profit but were not in the business of renting such property	8l			
m	Olympic and Paralympic medals and USOC prize money (see instructions)	8m			
n	Section 951(a) inclusion (see instructions)	8n			
o	Section 951A(a) inclusion (see instructions)	8o			
p	Section 461(l) excess business loss adjustment	8p			
q	Taxable distributions from an ABLE account (see instructions)	8q			
r	Scholarship and fellowship grants not reported on Form W-2	8r			
s	Nontaxable amount of Medicaid waiver payments included on Form 1040, line 1a or 1d	8s	( )		
t	Pension or annuity from a nonqualifed deferred compensation plan or a nongovernmental section 457 plan	8t			
u	Wages earned while incarcerated	8u			
v	Digital assets received as ordinary income not reported elsewhere. See instructions	8v			
z	Other income. List type and amount: foreign unemployment benefits 12,357.	8z	12,357.		
9	Total other income. Add lines 8a through 8z			9	12,357.
10	Combine lines 1 through 7 and 9. This is your **additional income**. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 8			10	12,357.

Part II Adjustments to Income

11	Educator expenses	11	
12	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106	12	
13	Health savings account deduction. Attach Form 8889	13	
14	Moving expenses for members of the Armed Forces. Attach Form 3903	14	
15	Deductible part of self-employment tax. Attach Schedule SE	15	
16	Self-employed SEP, SIMPLE, and qualified plans	16	
17	Self-employed health insurance deduction	17	
18	Penalty on early withdrawal of savings	18	
19a	Alimony paid	19a	
b	Recipient's SSN		
c	Date of original divorce or separation agreement (see instructions):		
20	IRA deduction	20	
21	Student loan interest deduction	21	7.
22	Reserved for future use	22	
23	Archer MSA deduction	23	
24	Other adjustments:		
a	Jury duty pay (see instructions) — 24a		
b	Deductible expenses related to income reported on line 8l from the rental of personal property engaged in for profit — 24b		
c	Nontaxable amount of the value of Olympic and Paralympic medals and USOC prize money reported on line 8m — 24c		
d	Reforestation amortization and expenses — 24d		
e	Repayment of supplemental unemployment benefits under the Trade Act of 1974 — 24e		
f	Contributions to section 501(c)(18)(D) pension plans — 24f		
g	Contributions by certain chaplains to section 403(b) plans — 24g		
h	Attorney fees and court costs for actions involving certain unlawful discrimination claims (see instructions) — 24h		
i	Attorney fees and court costs you paid in connection with an award from the IRS for information you provided that helped the IRS detect tax law violations — 24i		
j	Housing deduction from Form 2555 — 24j		
k	Excess deductions of section 67(e) expenses from Schedule K-1 (Form 1041) — 24k		
z	Other adjustments. List type and amount: — 24z		
25	Total other adjustments. Add lines 24a through 24z	25	
26	Add lines 11 through 23 and 25. These are your **adjustments to income**. Enter here and on Form 1040, 1040-SR, or 1040-NR, line 10	26	7.

SCHEDULE B (Form 1040)

Department of the Treasury
Internal Revenue Service

Interest and Ordinary Dividends

Attach to Form 1040 or 1040-SR.
Go to *www.irs.gov/ScheduleB* for instructions and the latest information.

OMB No. 1545-0074
2024
Attachment Sequence No. **08**

Name(s) shown on return	Your social security number
ToTran Nguyen	226-21-2917

Part I Interest

(See instructions and the Instructions for Form 1040, line 2b.)

Note: If you received a Form 1099-INT, 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.

			Amount
1	List name of payer. If any interest is from a seller-financed mortgage and the 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:		
	Dominion Energy Credit Union	1	57.78
	Discover Bank		200.88
2	Add the amounts on line 1	2	258.66
3	Excludable interest on series EE and I U.S. savings bonds issued after 1989. 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	258.66

Note: If line 4 is over $1,500, you must complete Part III.

Part II Ordinary Dividends

(See instructions and the Instructions for Form 1040, line 3b.)

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 dividends shown on that form.

			Amount
5	List name of payer:	5	
6	Add the amounts on line 5. Enter the total here and on Form 1040 or 1040-SR, line 3b	6	

Note: If line 6 is over $1,500, you must complete Part III.

Part III Foreign Accounts and Trusts

Caution: If required, failure to file FinCEN Form 114 may result in substantial penalties. Additionally, you may be required to file Form 8938, Statement of Specified Foreign Financial Assets. See instructions.

You must complete this part if you (**a**) had over $1,500 of taxable interest or ordinary dividends; (**b**) had a foreign account; or (**c**) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

		Yes	No
7a	At any time during 2024, did you have a financial interest in or signature authority over a financial account (such as a bank account, securities account, or brokerage account) located in a foreign country? See instructions	X	
	If "Yes," are you required to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), to report that financial interest or signature authority? See FinCEN Form 114 and its instructions for filing requirements and exceptions to those requirements	X	
b	If you are required to file FinCEN Form 114, list the name(s) of the foreign country(-ies) where the financial account(s) is (are) located: BE Belgium		
8	During 2024, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See instructions		X

Form Schedule 1 Line21 | **Student Loan Interest Deduction Worksheet** | **2024**

► Keep for your records

Name(s) Shown on Return	Social Security Number
ToTran Nguyen	226-21-2917

Part I Information from Form(s) 1098-E, Student Loan Interest Statement

(a) Lender's name	(b) Borrower (Taxpayer, Spouse)	(c) Borrower's social security number	(d) Prior Year Student Loan Interest	(e) Student loan interest (Box 1)
Additional fields for use by Step-by-Step, Upload/Extract, and Import only (See help)				
American Education Services	Taxpayer	226-21-2917		7.
X X				

Total student loan interest	7.
Less total student loan interest used for QTP (Section 529 plan)	
Total adjusted student loan interest	7.

Part II Computation of Student Loan Interest Deduction

1	Enter the total interest you paid in 2024 on qualified student loans (see Form 1040 instructions).	1	7.
2	Enter the **smaller** of line 1 or $2,500	2	7.
3	Modified AGI **Note:** If line 3 is $95,000 or more if single, head of household, or qualifying surviving spouse or $195,000 or more if married filing jointly, stop here. You cannot take the deduction.	3	12,616.
4	Enter: $80,000 if single, head of household, or qualifying surviving spouse; $165,000 if married filing jointly	4	80,000.
5	Subtract line 4 from line 3. If zero or less, enter -0- here and on line 7, skip line 6, and go on to line 8	5	0.
6	Divide line 5 by $15,000 or $30,000 if married filing jointly. Enter the result as a decimal (rounded to at least three places)	6	0.0000
7	Multiply line 2 by line 6	7	0.
8	**Student loan interest deduction**. Subtract line 7 from line 2. Enter the result here and on Form 1040, Sch 1, line 21. **Don't** include this amount in figuring any other deduction on your return (such as on Schedule A, C, E, etc.)	8	7.

* **Modified AGI** is the amount from Form 1040, line 9, increased by any excludable income from Puerto Rico, or of bona fide residents of American Samoa, Guam, or the Commonwealth of the Northern Mariana Islands, and foreign earned income/housing exclusion, and decreased by amounts on Schedule 1 (Form 1040), lines 11 through 20, 23 and 25.

Federal Carryover Worksheet 2024

► Keep for your records

Name(s) Shown on Return	Social Security Number
ToTran Nguyen	226-21-2917

2023 State and Local Income Tax Information

(a) State or Local ID	(b) Paid With Extension	(c) Estimates Pd After 12/31	(d) Total With-held/Pmts	(e) Paid With Return	(f) Total Over-payment	(g) Applied Amount
Totals . .						

2023 State Extension Information

(a) State	(b) Paid With Extension

2023 Locality Extension Information

(a) Locality	(b) Paid With Extension

2023 State Estimates Information

(a) State	(c) Estimates Paid After 12/31

2023 Locality Estimates Information

(a) Locality	(c) Estimates Paid After 12/31

2023 State Taxes Due Information

(a) State	(e) Paid With Return

2023 Locality Taxes Due Information

(a) Locality	(e) Paid With Return

2023 State Refund Applied Information

(a) State	(g) Applied Amount

2023 Locality Refund Applied Information

(a) Locality	(g) Applied Amount

2023 State Tax Refund Information

(a) State	(d) Total Withheld/Pmts	(f) Total Overpayment

2023 Locality Tax Refund Information

(a) Locality	(d) Total Withheld/Pmts	(f) Total Overpayment

Federal Carryover Worksheet page 2 **2024**

ToTran Nguyen 226-21-2917

Other Tax and Income Information		2023	2024
1 Filing status	1		1 Single
2 Number of exemptions for blind or over 65 (0 - 4)	2		
3 Itemized deductions	3		25.
4 Check box if required to itemize deductions	4	☐	☐
5 Adjusted gross income	5		12,609.
6 Tax liability for Form 2210 or Form 2210-F	6		0.
7 Alternative minimum tax	7		
8 Federal overpayment applied to next year estimated tax	8		

QuickZoom to the IRA Information Worksheet for IRA information ►

Excess Contributions		2023	2024
9 a Taxpayer's excess Archer MSA contributions as of 12/31	9 a		
b Spouse's excess Archer MSA contributions as of 12/31	b		
10 a Taxpayer's excess Coverdell ESA contributions as of 12/31	10 a		
b Spouse's excess Coverdell ESA contributions as of 12/31	b		
11 a Taxpayer's excess HSA contributions as of 12/31	11 a		
b Spouse's excess HSA contributions as of 12/31	b		

Loss and Expense Carryovers Note: Enter all entries as a positive amount		2023	2024
12 a Short-term capital loss	12 a		
b AMT Short-term capital loss	b		
13 a Long-term capital loss	13 a		
b AMT Long-term capital loss	b		
14 a Net operating loss available to carry forward	14 a		
b AMT Net operating loss available to carry forward	b		
15 a Investment interest expense disallowed	15 a		
b AMT Investment interest expense disallowed	b		
16 Nonrecaptured net Section 1231 losses from: a 2024	16 a		
b 2023	b		
c 2022	c		
d 2021	d		
e 2020	e		
f 2019	f		
17 AMT Nonrecap'd net Sec 1231 losses from: a 2024	17 a		
b 2023	b		
c 2022	c		
d 2021	d		
e 2020	e		
f 2019	f		

Credit Carryovers		2023	2024
18 General business credit	18		
19 Adoption credit from: a 2024	19a		
b 2023	b		
c 2022	c		
d 2021	d		
e 2020	e		
f 2019	f		
20 Mortgage interest credit from: a 2024	20 a		
b 2023	b		
c 2022	c		
d 2021	d		
21 Credit for prior year minimum tax	21		
22 District of Columbia first-time homebuyer credit	22		
23 Residential Clean Energy Credit (Previously the Residential energy efficient property credit	23		

Federal Carryover Worksheet page 3 **2024**

ToTran Nguyen 226-21-2917

Other Carryovers		2023	2024
24 Section 179 expense deduction disallowed	24		
25 Excess foreign housing deduction: a Taxpayer (Form 2555, line 46)	25 a		
b Taxpayer (Form 2555, line 48)	b		
c Spouse (Form 2555, line 46)	c		
d Spouse (Form 2555, line 48)	d		

Charitable Contribution Carryovers

26 **2023** Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%	**(e)** 60%
a 2023					
b 2022					
c 2021					
d 2020					
e 2019					

27 **2024** Carryover of charitable contributions from:	Other Property		Capital Gain		Cash
	(a) 50%	**(b)** 30%	**(c)** 30%	**(d)** 20%	**(e)** 60%
a 2024					0.
b 2023					
c 2022					
d 2021					
e 2020					

28 Amount overpaid less earned income credit

Qualified Business Income Deduction (Section 199A) carryovers			2023	2024
29 Qualified business loss carryforward		29		
30 Qualified PTP loss carryforward		30		
31 Applicable percentage	2018	31 a		
	2019	b		
	2020	c		
	2021	d		
	2022	e		
	2023	f		

2023 State Capital Loss Carryovers (For users **not** transferring from the prior year)

State ID	Short-term Capital Loss for State	AMT Short-term Capital Loss for State	Long-term Capital Loss for State	AMT Long-term Capital Loss for State	Capital Loss (combined) for State	AMT Capital Loss (combined) for State

ELECTRONIC POSTMARK - CERTIFICATION OF ELECTRONIC FILING

Taxpayer: ToTran Nguyen
Primary SSN: 226-21-2917

Federal Return Submitted: April 02, 2025 05:15 PM PST
Federal Return Acceptance Date:

Your return was electronically transmitted on 04/02/2025

The Intuit Electronic Postmark shows the date and time Intuit received your federal tax return. The Intuit Electronic Postmark documents the filing date of your income tax return, and the electronic postmark information should be kept on file with your tax return and other tax-related documentation.

There are two important aspects of the Intuit Electronic Postmark:

1. THE INTUIT ELECTRONIC POSTMARK.
The electronic postmark shows the date and time Intuit received the federal return, and is deemed the filing date if the date of the electronic postmark is on or before the date prescribed for filing of the federal individual income tax return.

TIMELY FILING:
For your federal return to be considered filed on time, your return must be postmarked on or before midnight April 15, 2025. Intuit's electronic postmark is issued in the Pacific Time (PT) zone. If you are not filing in the PT zone, you will need to add or subtract hours from the Intuit Electronic Postmark time to determine your local postmark time. For example, if you are filing in the Eastern Time (ET) zone, and you electronically file your return at 9 AM on April 15, 2025, your Intuit electronic postmark will indicate April 15, 2025, 6 AM. If your federal tax return is rejected, the IRS still considers it filed on time if the electronic postmark is on or before April 15, 2025, and a corrected return is submitted and accepted before April 20, 2025. If your return is submitted after April 20, 2025, a new time stamp is issued to reflect that your return was submitted after the IRS deadline, and consequently, is no longer considered to have been filed on time.

If you request an automatic six-month extension, your return must be electronically postmarked by midnight October 15, 2025. If your federal tax return is rejected, the IRS will still consider it filed on time if the electronic postmark is on or before October 15, 2025, and the corrected return is submitted and accepted by October 20, 2025

2. THE ACCEPTANCE DATE.
Once the IRS accepts the electronically filed return, the acceptance date will be provided by the Intuit Electronic Filing Center. This date is proof that the IRS accepted the electronically filed return.

DISCOVER

ONLINE SAVINGS

Account Number: 3226612918
Statement Period: May 01, 2025 - May 31, 2025

ACCOUNT SUMMARY

Beginning Balance	$8,861.07	Annual Percentage Yield Earned	3.60%
Deposits and Credits	+$25.98	Interest Earned This Period	$25.98
Electronic Withdrawals	-$1,400.83	Interest Paid Year-to-Date	$152.65
Service Charges, Fees, and Other Withdrawals	-$0.00	Days in Statement Period	31
Ending Balance	$7,486.22	Average Daily Balance	$8,635.13

ACCOUNT ACTIVITY

Deposits and Credits

Eff. Date	Syst. Date	Description		Amount
May 31	May 31	Interest Paid	$	25.98
		TOTAL DEPOSITS AND CREDITS	$	25.98

Electronic Withdrawals

May 27	May 27	ACH Withdrawal CHASE CREDIT CRD AUTOPAY	$	1,400.83
		TOTAL ELECTRONIC WITHDRAWALS	$	1,400.83

Eff. Date - for interest bearing products, the date interest calculation is impacted by transaction.
Syst. Date - the date transaction is generally processed and posted.

Overdraft/Returned Item Fees Summary

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

Contact Us

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Hearing/Speech Impaired
Dial 711 (Relay Service)

Mail
Discover, PO Box 30416
Salt Lake City, UT 84130

Please fold on the perforation below, detach and return with your deposit.

See last page for important information about your account.

TOTRAN T NGUYEN
8601 Lonepine Rd
Richmond, VA 23294-6029

Deposit Slip

Account number ending in 2918

Date		
List Checks Separately	Dollars	Cents
	$	.
	$	.
	$	.
	$	.
	$	.
TOTAL	**$**	.

DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL
Do not send cash or staple checks to this form.
Mail to: Discover, PO Box 30417, Salt Lake City, UT 84130

⑆031100649⑆ 3226612918⑈ 110

CONTACT US

Online	Mobile	Phone	Mail
Access your account securely at Discover.com	Download our mobile app in your app store to manage your account, anytime, anywhere	U.S.-based customer service team 24/7 at 1-800-347-7000 Hearing/Speech Impaired Dial 711 (Relay Service)	Discover PO Box 30416 Salt Lake City, UT 84130

Balancing Your Bank Statement

Month ____________________ 20 ______

Withdrawals outstanding—not charged to account

DATE/NO.	$	
TOTAL		

Bank balance shown on this statement $ ____________________

ADD +

Deposits not credited in this statement (if any)
$ ____________________
$ ____________________
$ ____________________

TOTAL $ ____________________

SUBTRACT –

Withdrawals Outstanding $ ____________________

BALANCE $ ____________________

Statement balance should agree with your account register balance after deducting a service charge (if any) shown on this statement for the previous month.

Important Information

In Case of Errors or Questions About Your Electronic Transfers

Telephone us at 1-800-347-7000or write us at Discover, PO Box 30411, Salt Lake City, UT 84130as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

1. Tell us your name and account number.
2. Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
3. Tell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

Preauthorized Credits

If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you can call us at 1-800-347-7000to verify whether or not the deposit has been made.

DISCOVER

ONLINE SAVINGS

Account Number: 3226612918
Statement Period: Apr 01, 2025 - Apr 30, 2025

1

ACCOUNT SUMMARY

Beginning Balance	$9,178.77	Annual Percentage Yield Earned	3.67%
Deposits and Credits	+$27.03	Interest Earned This Period	$27.03
Electronic Withdrawals	-$344.73	Interest Paid Year-to-Date	$126.67
Service Charges, Fees, and Other Withdrawals	-$0.00	Days in Statement Period	30
Ending Balance	$8,861.07	Average Daily Balance	$9,109.82

ACCOUNT ACTIVITY

Deposits and Credits

Eff. Date	Syst. Date	Description		Amount
Apr 30	Apr 30	Interest Paid	$	27.03
		TOTAL DEPOSITS AND CREDITS	$	27.03

Electronic Withdrawals

Eff. Date	Syst. Date	Description		Amount
Apr 25	Apr 25	ACH Withdrawal CHASE CREDIT CRD AUTOPAY	$	344.73
		TOTAL ELECTRONIC WITHDRAWALS	$	344.73

Eff. Date - for interest bearing products, the date interest calculation is impacted by transaction.
Syst. Date - the date transaction is generally processed and posted.

Overdraft/Returned Item Fees Summary

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

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TOTRAN T NGUYEN
8601 Lonepine Rd
Richmond, VA 23294-6029

Deposit Slip Account number ending in 2918

Date		
List Checks Separately	Dollars	Cents
	$.	
	$.	
	$.	
	$.	
	$.	
TOTAL	**$** .	

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Mail to: Discover Bank, PO Box 30417, Salt Lake City, UT 84130

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Balancing Your Bank Statement

Month ____________________ 20 ______

Withdrawals outstanding—not charged to account

DATE/NO.	$	
TOTAL		

Bank balance shown on this statement $ ____________________

ADD +

Deposits not credited in this statement (if any)
$ ____________________
$ ____________________
$ ____________________

TOTAL $ ____________________

SUBTRACT –

Withdrawals Outstanding $ ____________________

BALANCE $ ____________________

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ACCOUNT SUMMARY

Beginning Balance	$12,342.49	Annual Percentage Yield Earned	3.72%
Deposits and Credits	+$99.64	Interest Earned This Period	$99.64
Electronic Withdrawals	-$3,263.36	Interest Paid Year-to-Date	$99.64
Service Charges, Fees, and Other Withdrawals	-$0.00	Days in Statement Period	90
Ending Balance	$9,178.77	Average Daily Balance	$11,000.36

ACCOUNT ACTIVITY

Deposits and Credits

Eff. Date	Syst. Date	Description		Amount
Jan 31	Jan 31	Interest Paid	$	37.95
Feb 28	Feb 28	Interest Paid		30.78
Mar 31	Mar 31	Interest Paid		30.91
		TOTAL DEPOSITS AND CREDITS	$	99.64

Electronic Withdrawals

Eff. Date	Syst. Date	Description		Amount
Jan 27	Jan 27	ACH Withdrawal CHASE CREDIT CRD AUTOPAY	$	1,384.11
Feb 25	Feb 25	ACH Withdrawal CHASE CREDIT CRD AUTOPAY		808.82
Mar 25	Mar 25	ACH Withdrawal CHASE CREDIT CRD AUTOPAY		990.43
Mar 30	Mar 30	Zelle Payment To MARION GATIGNOL 4BQ1VG9ZD		80.00
		TOTAL ELECTRONIC WITHDRAWALS	$	3,263.36

Eff. Date - for interest bearing products, the date interest calculation is impacted by transaction.
Syst. Date - the date transaction is generally processed and posted.

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Salt Lake City, UT 84130

Please fold on the perforation below, detach and return with your deposit.

See last page for important information about your account.

Deposit Slip Account number ending in 2918

Date		
List Checks Separately	Dollars	Cents
	$.	
	$.	
	$.	
	$.	
	$.	
TOTAL	**$** .	

TOTRAN T NGUYEN
8601 Lonepine Rd
Richmond, VA 23294-6029

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Mail to: Discover Bank, PO Box 30417, Salt Lake City, UT 84130

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Overdraft/Returned Item Fees Summary

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

CONTACT US

Balancing Your Bank Statement

Month ____________________ 20 ______

Withdrawals outstanding—not charged to account

DATE/NO.	$	
TOTAL		

Bank balance shown on this statement $ ____________________

ADD +

Deposits not credited in this statement (if any)
$ ____________________
$ ____________________
$ ____________________

TOTAL $ ____________________

SUBTRACT –

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