

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		Payer's RTN (optional)		OMB No. 1545-0112		<b>Interest Income</b>
		1 Interest income		<div style="font-size: 2em; font-weight: bold;">20XX</div>		
		\$		Form <b>1099-INT</b>		<b>Copy 2</b>
		2 Early withdrawal penalty		\$		
PAYER'S TIN	RECIPIENT'S TIN	3 Interest on U.S. Savings Bonds and Treas. obligations		\$		<b>To be filed with recipient's state income tax return, when required.</b>
RECIPIENT'S name		4 Federal income tax withheld		5 Investment expenses		
		\$		\$		
Street address (including apt. no.)		6 Foreign tax paid		7 Foreign country or U.S. possession		
		\$				
City or town, state or province, country, and ZIP or foreign postal code		8 Tax-exempt interest		9 Specified private activity bond interest		
		\$		\$		
		10 Market discount		11 Bond premium		
		\$		\$		
		FATCA filing requirement <input type="checkbox"/>		12 Bond premium on Treasury obligations		
		\$		13 Bond premium on tax-exempt bond		
		\$		\$		
Account number (see instructions)		14 Tax-exempt and tax credit bond CUSIP no.		15 State	16 State identification no.	17 State tax withheld
						\$

Form **1099-INT**

[www.irs.gov/Form1099INT](http://www.irs.gov/Form1099INT)

Department of the Treasury - Internal Revenue Service