# Revenue Procedure 2007-50

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# General Rules and Specifications for Substitute Forms 1096, 1098, 1099, 5498, W-2G, and 1042-S

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# Part 1
# General Information

## Section 1.1 — Overview of Revenue Procedure 2007–50

**1.1.1 Purpose**

The purpose of this revenue procedure is to set forth the 2007 requirements for:

- Using official Internal Revenue Service (IRS) forms to file information returns with the IRS,
- Preparing acceptable substitutes of the official IRS forms to file information returns with the IRS, and
- Using official or acceptable substitute forms to furnish information to recipients.

**1.1.2 Which Forms Are Covered?**

This revenue procedure contains specifications for these information returns:

| Form | Title |
|---|---|
| 1096 | Annual Summary and Transmittal of U.S. Information Returns |
| 1098 | Mortgage Interest Statement |
| 1098-C | Contributions of Motor Vehicles, Boats, and Airplanes |
| 1098-E | Student Loan Interest Statement |
| 1098-T | Tuition Statement |
| 1099-A | Acquisition or Abandonment of Secured Property |
| 1099-B | Proceeds From Broker and Barter Exchange Transactions |
| 1099-C | Cancellation of Debt |
| 1099-CAP | Changes in Corporate Control and Capital Structure |
| 1099-DIV | Dividends and Distributions |
| 1099-G | Certain Government Payments |
| 1099-H | Health Coverage Tax Credit (HCTC) Advance Payments |
| 1099-INT | Interest Income |
| 1099-LTC | Long-Term Care and Accelerated Death Benefits |
| 1099-MISC | Miscellaneous Income |
| 1099-OID | Original Issue Discount |
| 1099-PATR | Taxable Distributions Received From Cooperatives |
| 1099-Q | Payments From Qualified Education Programs (Under Sections 529 and 530) |

| Form | Title |
| --- | --- |
| 1099-R | Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. |
| 1099-S | Proceeds From Real Estate Transactions |
| 1099-SA | Distributions From an HSA, Archer MSA, or Medicare Advantage MSA |
| 5498 | IRA Contribution Information |
| 5498-ESA | Coverdell ESA Contribution Information |
| 5498-SA | HSA, Archer MSA, or Medicare Advantage MSA Information |

| Form | Title |
|---|---|
| W-2G | Certain Gambling Winnings |
| 1042-S | Foreign Person's U.S. Source Income Subject to Withholding |

**1.1.3 Scope**

For purposes of this revenue procedure, a substitute form or statement is one that is not printed by the IRS. For a substitute form or statement to be acceptable to the IRS, it must conform to the official form or the specifications outlined in this revenue procedure. Do not submit any substitute forms or statements listed above to the IRS for approval. Privately printed forms may not state, "This is an IRS approved form."

Filers making payments to certain recipients during a calendar year are required by the Internal Revenue Code (the Code) to file information returns with the IRS for these payments. These filers must also provide this information to their recipients. In some cases, this also applies to payments received. See *Part 4* for specifications that apply to recipient statements (generally Copy B).

In general, section 6011 of the Code contains requirements for filers of information returns. A filer must file information returns on magnetic media, through electronic media, or on paper. A filer who is required to file 250 or more information returns of any one type during a calendar year must file those returns by magnetic media or electronic media.

Although not required, small volume filers (fewer than 250 returns during a calendar year) may file the forms on magnetic media or electronically. See the legal requirements for filing information returns (and providing a copy to a payee) in the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G and the 2007 Instructions for Form 1042-S. In addition, see the most recent revision of Publication 1220, *Specifications for Filing Forms 1098, 1099, 5498, and W-2G Electronically or Magnetically*.

**1.1.4 For More Information**

The IRS prints and provides the forms on which various payments must be reported. Alternatively, filers may prepare substitute copies of these IRS forms and use such forms to report payments to the IRS.

- For copies of the official forms and instructions, call our toll-free number at 1-800-TAX-FORM (1-800-829-3676).
- The IRS operates a central call site to answer questions related to information returns, penalties, and backup withholding. The hours of operation are Monday through Friday from 8:30 a.m. to 4:30 p.m., Eastern time. For your convenience, you may call the toll-free number, 1-866-455-7438. You may still use the original telephone number, 304-263-8700 (not toll-free). For TTY/TDD equipment, call 304-267-3367 (not toll-free).

- For other tax information related to business returns or accounts, call 1-800-829-4933. If you have access to TTY/TDD equipment, call 1-800-829-4059 to ask tax account questions or to order forms and publications.

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**1.1.5 What's New** The following changes have been made to this year's Revenue Procedure:

- Form 1042-S: New regulations under section 1.671-5 provide reporting rules for widely held fixed investment trusts (WHFITs). A new income code 37 has been added to report distributions that are a return of capital. Beginning with tax year 2008, processing year 2009, the IRS will no longer accept tape cartridges. In addition, you will not be able to use magnetic media to file Forms 1099, 1098, 5498, W-2G, and 1042-S.
- Form 1098: Box 4 has been revised and new box 5 added to comply with the new reporting requirements mandated by the Tax Relief and Health Care Act of 2006 section 419 (P.L. 109-432) requiring the reporting of certain mortgage insurance premiums paid or accrued after December 31, 2006. The previously untitled box 4 is now titled "Mortgage insurance premiums" and the legend on Copy B has been revised to include box 4 in the list of boxes containing information that is being furnished to the Internal Revenue Service. A new box 5 has been added to serve the function previously performed by box 4. Box 5 is to be used by the filer to provide any information to the recipient that may be useful, but which is not required, such as the address of the property. A description of the new information has been added to the back of Copy B for box 4 and new box 5. Payers are, in the box 4 information, directed to the instructions for Schedule A (Form 1040) for additional information on the deductibility of mortgage insurance premiums.
- Final Regulations section 1.671-5(d) requires trustees and middlemen to file with the IRS the appropriate Form 1099 beginning with calender year 2007. The appropriate forms include Form 1099-DIV, 1099-B, 1099-INT, 1099-MISC or 1099-OID. For additional reporting information, see Part A in the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.
- Form 1099-G: A separate Form 1099-G is required to report distributions from a contributory program treated as unemployment compensation. For additional reporting information, see box 1, Unemployment compensation of, Form 1099-G instructions.
- Logos and advertising: The IRS has identified questionable information reporting forms, for instance the Form 1099 as a key indicator of potentially abusive and fraudulent returns. Some questionable information reporting forms may be confused with legitimate information reporting that carries logos and advertisements. The IRS has received questions concerning whether a logo or an identifying slogan for an employer or other preparer is acceptable on the substitute employee

statements. We were also asked whether an advertisement for tax preparation software or other marketing materials are acceptable on, or attached to, the substitute employee statements. The IRS is continuing to solicit comments regarding these questions. The IRS anticipates responding to these questions by revising the regulations concerning this issue after the comments have been considered, and it will include requirements brought about by the regulations in a future update of this revenue procedure. Send your comments to:

Internal Revenue Service
Attn: Substitute Forms Program
SE:W:CAR:MP:T:T:SP
1111 Constitution Ave., NW
Room 6406
Washington, DC 20224

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## Section 1.2 — General Requirements for Acceptable Substitute Forms 1096, 1098, 1099, 5498, W-2G, and 1042-S

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**1.2.1 Introduction**

Paper substitutes for Form 1096 and Copy A of Forms 1098, 1099, 5498, W-2G, and 1042-S that totally conform to the specifications listed in this revenue procedure may be privately printed and filed as returns with the IRS. The reference to the Department of the Treasury — Internal Revenue Service should be included on all such forms.

If you are uncertain of any specification and want it clarified, you may submit a letter citing the specification, stating your understanding and interpretation of the specification, and enclosing an example of the form (if appropriate) to:

Internal Revenue Service
Attn: Substitute Forms Program
SE:W:CAR:MP:T:T:SP
1111 Constitution Ave., NW
Room 6406
Washington, DC 20224

**Note.** Allow at least 30 days for the IRS to respond.

You may also contact the Substitute Forms Program via e-mail at **taxforms@irs.gov* (the asterisk must be included in the address). Please enter "Substitute Forms" on the Subject Line.

Forms 1096, 1098, 1099, 5498, W-2G, and 1042-S are subject to annual review and possible change. Therefore, filers are cautioned against overstocking

supplies of privately printed substitutes. The specifications contained in this revenue procedure apply to 2007 forms only.

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**1.2.2 Copy A Specifications**

Proposed substitutes of Copy A must be an exact replica of the official IRS form with respect to layout and content. Proposed substitutes for Copy A that do not conform to the specifications in this revenue procedure are not acceptable. Further, if you file such forms with the IRS, you may be subject to a penalty for failure to file a correct information return under section 6721 of the Code. Generally, the penalty is $50 for each return where such failure occurs (up to $250,000). No IRS office is authorized to allow deviations from this revenue procedure.

***Caution:*** Overuse of proportional fonts may cause you to be subject to penalties and delays in processing.

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**1.2.3 Copy B and Copy C Specifications**

Copies B and Copies C of the following forms must contain the information in *Part 4* to be considered a "statement" or "official form" under the applicable provisions of the Code. The format of this information is at the discretion of the filer with the exception of the location of the tax year, form number, form name, and the information for composite Form 1099 statements as outlined under *Section 4.2.*

Copy B, of the forms below, are for the following recipients.

| Form | Recipient |
|---|---|
| 1098 | For Payer |
| 1098-C | For Donor |
| 1098-E; 1099-A | For Borrower |
| 1098-T | For Student |
| 1099-C | For Debtor |
| 1099-CAP | For Shareholder |
| 1099-LTC | For Policyholder |
| 1099-R; W-2G | Indicates that these forms may require Copy B to be attached to the federal income tax return. |
| 1099-S | For Transferor |
| All other Forms 1099; 1042-S | For Recipient |
| 5498; 5498-SA | For Participant |
| 5498-ESA | For Beneficiary |

Copy C of the following forms are:

| Form | Recipient |
|---|---|
| 1098-C | For Donor's Records |
| 1099-CAP | For Corporation |
| 1099-LTC | For Insured |
| 1099-R | For Recipient's Records |
| All other Forms 1099 | See *Section 4.4.2* |
| 5498-ESA | For Trustee |
| W-2G | For Winner's Records |

**Note.** On Copy C, Form 1099-LTC, you may reverse the locations of the policyholder's and the insured's name, street address, city, state, and ZIP code for easier mailing.

## Section 1.3 — Definitions

**1.3.1 Form Recipient**

Form recipient means the person to whom you are required by law to furnish a copy of the official form or information statement. The form recipient may be referred to by different names on various Forms 1099 and related forms ("payer," "borrower," "student," "debtor," "policyholder," "insured," "transferor," "recipient," "participant," "donor," or, in the case of Form W-2G, the "winner"). See *Section 1.2.3,* earlier.

**1.3.2 Filer**

Filer means the person or organization required by law to file a form listed in *Section 1.1.2* with the IRS. As outlined earlier, a filer may be a payer, creditor, recipient of mortgage or student loan interest payments, educational institution, broker, barter exchange, person reporting real estate transactions, trustee or issuer of any individual retirement arrangement or medical savings account, lender who acquires an interest in secured property or who has reason to know that the property has been abandoned, or certain donees of motor vehicles, boats, and airplanes.

**1.3.3 Substitute Form**

Substitute form means a paper substitute of Copy A of an official form listed in *Section 1.1.2* that totally conforms to the provisions in this revenue procedure.

**1.3.4 Substitute Form Recipient Statement**

Substitute form recipient statement means a paper statement of the information reported on a form listed in *Section 1.1.2*. This statement must be furnished to a person (form recipient), as defined under the applicable provisions of the Code and the applicable regulations.

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**1.3.5 Composite Substitute Statement**

Composite substitute statement means one in which two or more required statements (for example, Forms 1099-INT and 1099-DIV) are furnished to the recipient on one document. However, each statement must be designated separately and must contain all the requisite Form 1099 information except as provided under *Section 4.2*. A composite statement may not be filed with the IRS.

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# Part 2
# Specifications for Substitute Forms 1096 and Copies A of Forms 1098, 1099, and 5498 (All Filed with the IRS)

## Section 2.1 — Specifications

**2.1.1 General Requirements**

Form identifying numbers (for example, 9191 for Form 1099-DIV) must be printed in nonreflective black carbon-based ink in print positions 15 through 19 using an OCR A font. The check boxes to the right of the form identifying numbers must be 10-point boxes. The "VOID" checkbox is in print position 25. The "CORRECTED" check box is in position 33. Measurements are from the left edge of the paper, not including the perforated strip. See *Exhibits E* and *N*.

The substitute form must be an exact replica of the official IRS form with respect to layout and content. To determine the correct form measurements, see *Exhibits A* through *Z* at the end of this publication.

Hot wax and cold carbon spots are not permitted on any of the internal form plies. These spots are permitted on the back of a mailer top envelope ply.

Use of chemical transfer paper for Copy A is acceptable.

The Government Printing Office (GPO) symbol must be deleted.

**2.1.2 Color and Paper Quality**

Color and paper quality for Copy A (cut sheets and continuous pinfeed forms) as specified by JCP Code 0–25, dated November 29, 1978, must be white 100% bleached chemical wood, optical character recognition (OCR) bond produced in accordance with the following specifications.

**Note.** Reclaimed fiber in any percentage is permitted provided the requirements of this standard are met.

- Acidity: Ph value, average, not less than..... 4.5
- Basis Weight: 17 x 22-500 cut sheets..... 18-20
- Metric equivalent–g/$m^2$..... 75

  A tolerance of ±5 pct. is allowed.
- Stiffness: Average, each direction, not less than-milligrams 50
- Tearing strength: Average, each direction, not less than-grams..... 40
- Opacity: Average, not less than-percent ..... 82
- Thickness: Average-inch ..... 0.0038

- Metric equivalent-mm . . . . . 0.097

  A tolerance of +0.0005 inch (0.0127 mm) is allowed. Paper cannot vary more than 0.0004 inch (0.0102 mm) from one edge to the other.
- Porosity: Average, not less than-seconds . . . . . 10
- Finish (smoothness): Average, each side-seconds . . . . . 20-55
- For information only, the Sheffield equivalent-units . . . . . 170-100
- Dirt: Average, each side, not to exceed-parts per million . . 8

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**2.1.3 Chemical Transfer Paper**

Chemical transfer paper is permitted for Copy A only if the following standards are met:

- Only chemically backed paper is acceptable for Copy A. Front and back chemically treated paper cannot be processed properly by machine.
- Carbon-coated forms are not permitted.
- Chemically transferred images must be black.

All copies must be clearly legible. Hot wax and cold carbon spots are not permitted for Copy A. Interleaved carbon should be black and must be of good quality to assure legibility on all copies and to avoid smudging. Fading must be minimized to assure legibility.

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**2.1.4 Printing**

All print on Copy A of Forms 1098, 1099, 5498, and the print on Form 1096 above the statement, "Return this entire page to the Internal Revenue Service. Photocopies are not acceptable." must be in Flint J–6983 red OCR dropout ink or an exact match. However, the four-digit form identifying number must be in nonreflective carbon-based black ink in OCR A font.

The shaded areas of any substitute form should generally correspond to the format of the official form.

The printing for the Form 1096 statement and the following text may be in any shade or tone of black ink. Black ink should only appear on the lower part of the reverse side of Form 1096, where it will not bleed through and interfere with scanning.

**Note.** The instructions on the front and back of Form 1096, which include filing addresses, must be printed.

Separation between fields must be 0.1 inch.

Except for Form 1099-R and 1099-MISC, the numbered captions are printed as solid with no shaded background.

Other printing requirements are discussed below.

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**2.1.5 OCR Specifications**

The contractor must initiate or have a quality control program to assure OCR ink density. Readings will be made when printed on approved 20 lb. white OCR bond with a reflectance of not less than 80%. Black ink must not have a reflectance greater than 15%. These readings are based on requirements of the "Scan-Optics Series 9000" Optical Scanner using Flint J–6983 red OCR dropout ink or an exact match.

The following testers and ranges are acceptable:

- *MacBeth PCM-II*. The tested Print Contrast Signal (PCS) values when using the MacBeth PCM-II tester on the "C" scale must range from .01 minimum to .06 maximum.
- *Kidder 082A*. The tested PCS values when using the Kidder 082A tester on the Infra Red (IR) scale must range from .12 minimum to .21 maximum. White calibration disc must be 100%. Sensitivity must be set at one (1).
- *Alternative testers*. Alternative testers must be approved by the government so that tested PCS values can be established. You may obtain approval by writing to the following address:

  Commissioner of Internal Revenue
  Attn: SE:W:CAR:MP:P:B:T
  Business Publishing – Tax Products
  1111 Constitution Ave., NW
  Washington, DC 20224

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**2.1.6 Typography**

Type must be substantially identical in size and shape to the official form. All rules are either 1/2-point or 3/4-point. Rules must be identical to those on the official IRS form.

**Note.** The form identifying number must be nonreflective carbon-based black ink in OCR A font.

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**2.1.7 Dimensions**

Generally, three Forms 1098, 1099, or 5498 (Copy A) are contained on a single page, 8 inches wide (without any snap-stubs and/or pinfeed holes) by 11 inches deep.

**Exceptions.** Forms 1099-B, 1099-DIV, 1099-MISC, 1099-R, and 1042-S contain two documents per page. Form 1098-C is a single page document.

There is a .33 inch top margin from the top of the corrected box, and a .25 inch right margin. There is a 1/32 (0.0313) inch tolerance for the right margin. If the right and top margins are properly aligned, the left margin for all forms

will be correct. All margins must be free of print. See *Exhibits A* through *Z* in this publication for the correct form measurements.

These measurements are constant for certain Forms 1098, 1099, and 5498. These measurements are shown only once in this publication, on Form 1098 (Exhibit B). Exceptions to these measurements are shown on the rest of the exhibits.

The depth of the individual trim size of each form on a page must be 3 2/3 inches, the same depth as the official form.

**Exceptions.** The depth of Forms 1099-B, 1099-DIV, 1099-MISC, 1099-R, and 1042-S is 5 1/2 inches.

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**2.1.8 Perforation**

Copy A (three per page; two per page for Forms 1099-B, 1099-DIV, 1099-MISC, 1099-R, and 1042-S) of privately printed continuous substitute forms must be perforated at each 11" page depth. No perforations are allowed between the 3 2/3" forms (5 1/2" for Forms 1099-B, 1099-DIV, 1099-MISC, or 1099-R) on a single copy page of Copy A.

The words "Do Not Cut or Separate Forms on This Page" must be printed in red dropout ink (as required by form specifications) between the three forms (two for Forms 1099-B, 1099-DIV, 1099-MISC, or 1099-R).

**Note.** Perforations are required between all the other individual copies (Copies B and C, and Copies 1 and 2 for Forms 1099-R and 1099-MISC, and Copy D for Forms 1099-LTC and 1099-R) in the set.

---

**2.1.9 What To Include**

You must include the OMB Number on Copies A and Form 1096 in the same location as on the official form.

The words "For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G" must be printed on Copy A; "For more information and the Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G" must be printed on Form 1096.

A postal indicia may be used if it meets the following criteria:

- It is printed in the OCR ink color prescribed for the form, and
- No part of the indicia is within one print position of the scannable area.

The printer's symbol (GPO) must not be printed on substitute Copy A. Instead, the employer identification number (EIN) of the forms printer must be entered in the bottom margin on the face of each individual form of Copy A, or on the bottom margin on the back of each Form 1096.

The Catalog Number (Cat. No.) shown on the 2007 forms is used for IRS distribution purposes and need not be printed on any substitute forms.

The form must not contain the statement "IRS approved" or any similar statement.

## Section 2.2 — Instructions for Preparing Paper Forms That Will Be Filed with the IRS

### 2.2.1 Recipient Information

The form recipient's name, street address, city, state, ZIP code, and telephone number (if required) should be typed or machine printed in black ink in the same format as shown on the official IRS form. The city, state, and ZIP code must be on the same line.

The following rules apply to the form recipient's name(s):

- The name of the appropriate form recipient must be shown on the first or second name line in the area provided for the form recipient's name.
- No descriptive information or other name may precede the form recipient's name.
- Only one form recipient's name may appear on the first name line of the form.
- If the multiple recipients' names are required on the form, enter on the first name line the recipient name that corresponds to the recipient taxpayer identification number (TIN) shown on the form. Place the other form recipients' names on the second name line (only 2 name lines are allowable).

Because certain states require that trust accounts be provided in a different format, generally filers should provide information returns reflecting payments to trust accounts with the:

- Trust's employer identification number (EIN) in the recipient's TIN area,
- Trust's name on the recipient's first name line, and
- Name of the trustee on the recipient's second name line.

Although handwritten forms will be accepted, the IRS prefers that filers type or machine print data entries. Also, filers should insert data in the middle of blocks well separated from other printing and guidelines, and take measures to guarantee clear, dark black, sharp images. Carbon copies and photocopies are not acceptable.

### 2.2.2 Account Number Box

Use the account number box on all Forms 1098, 1099, 5498, and W-2G for an account number designation when required by the official IRS form. The account number is required if you have multiple accounts for a recipient for whom you are filing more than one information return of the same type.

Additionally, the IRS encourages you to include the recipients' account number on paper forms if your system of records uses the account number rather than the name or TIN for identification purposes. Also, the IRS will include the account number in future notices to you about backup withholding. If you use window envelopes and a reduced rate to mail statements to recipients, be sure the account number does not appear in the window. Otherwise, the Postal Service may not accept them for mailing.

**Exception.** Form 1098-T can have third party provider information.

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**2.2.3 Specifications and Restrictions**

Machine-printed forms should be printed using a 6 lines/inch option, and should be printed in 10 pitch pica (10 print positions per inch) or 12 pitch elite (12 print positions per inch). Proportional spaced fonts are unacceptable.

Substitute forms prepared in continuous or strip form must be burst and stripped to conform to the size specified for a single sheet before they are filed with the IRS. The size specified does not include pin feed holes. Pin feed holes must not be present on forms filed with the IRS.

Do not:

- Use a felt tip marker. The machine used to "read" paper forms generally cannot read this ink type.
- Use dollar signs ($), ampersands (&), asterisks (*), commas (,), or other special characters in the numbered money boxes.
  **Exception.** Use decimal points to indicate dollars and cents (for example, 2000.00 is acceptable).
- Use apostrophes ('), asteriks (*), or other special characters on the payee name line.
- Fold Forms 1098, 1099, or 5498 mailed to the IRS. Mail these forms flat in an appropriately sized envelope or box. Folded documents cannot be readily moved through the machine used in IRS processing.
- Staple Forms 1096 to the transmitted returns. Any staple holes near the return code number may impair the IRS's ability to machine scan the type of documents.
- Type other information on Copy A.
- Cut or separate the individual forms on the sheet of forms of Copy A (except Forms W-2G).

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**2.2.4 Where To File**

Mail completed paper forms to the IRS service center shown in the Instructions for Form 1096 and in the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. Specific information needed to complete the forms mentioned in this revenue procedure are given in the specific form instructions. A chart is included in the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G giving a quick guide to which form must be filed to report a particular payment.

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# Part 3
# Specifications for Substitute Form W-2G (Filed with the IRS)

## Section 3.1 — General

**3.1.1 Purpose**

The following specifications give the format requirements for substitute Form W-2G (Copy A only), which is filed with the IRS.

A filer may use a substitute Form W-2G to file with the IRS (referred to as "substitute Copy A"). The substitute form must be an exact replica of the official form with respect to layout and content.

## Section 3.2 — Specifications for Copy A of Form W-2G

**3.2.1 Substitute Form W-2G (Copy A)**

You must follow these specifications when printing substitute Copy A of the Form W-2G.

| Item | Substitute Form W-2G (Copy A) |
|---|---|
| Paper Color and Quality | Paper for Copy A must be white chemical wood bond, or equivalent, 20 pound (basis 17 x 22-500), plus or minus 5 percent. The paper must consist substantially of bleached chemical wood pulp. It must be free from unbleached or ground wood pulp or post-consumer recycled paper. It also must be suitably sized to accept ink without feathering. |
| Ink Color and Quality | All printing must be in a high quality non gloss black ink. |
| Typography | The type must be substantially identical in size and shape to the official form. All rules on the document are either 1/2 point (.007 inch), 1 point (0.015 inch), or 3 point (0.045 inch). Vertical rules must be parallel to the left edge of the document, horizontal rules to the top edge. |

| Item | Substitute Form W-2G (Copy A) |
|---|---|
| Dimensions | The official form is 8 inches wide x 3 2/3 inches deep, exclusive of a 2/3 inch snap stub on the left side of the form. Any substitute Copy A must be the same dimensions. The snap feature is not required on substitutes. All margins must be free of print. The top and right margins must be 1/4 inch plus or minus .0313. If the top and right margins are properly aligned, the left margin for all forms will be correct. If the substitute forms are in continuous or strip form, they must be burst and stripped to conform to the size specified for a single form. |
| Hot Wax and Cold Carbon Spots | Hot wax and cold carbon spots are not permitted on any of the internal form plies. These spots are permitted on the back of a mailer top envelope ply. Interleaved carbons, if used, should be black and of good quality to avoid smudging. |
| Printer's Symbol | The Government Printing Office (GPO) symbol must not be printed on substitute Forms W-2G. Instead, the employer identification number (EIN) of the form's printer must be printed in the bottom margin on the face of each individual Copy A on a sheet. The form must not contain the statement "IRS approved" or any similar statement. |
| Catalog Number | The Catalog Number (Cat. No.) shown on Form W-2G is used for IRS distribution purposes and need not be printed on any substitute forms. |

# Part 4
# Substitute Statements to Form Recipients and Form Recipient Copies

## Section 4.1 — Specifications

**4.1.1 Introduction**

If you do not use the official IRS form to furnish statements to recipients, you must furnish an acceptable substitute statement. To be acceptable, your substitute statement must comply with the rules in this section. If you are furnishing a substitute form, see Regulations sections 1.6042-4, 1.6044-5, 1.6049-6, and 1.6050N-1 to determine how the following statements must be provided to recipients for most Forms 1099-DIV and 1099-INT, all Forms 1099-OID and 1099-PATR, and Form 1099-MISC or 1099-S for royalties. Generally, information returns may be furnished electronically with the consent of the recipient. See Section 4.5.1.

**Note.** A trustee of a grantor-type trust may choose to file Forms 1099 and furnish a statement to the grantor under Regulations sections 1.671-4(b)(2)(iii) and (b)(3)(ii). The statement required by those regulations is not subject to the requirements outlined in this section.

**4.1.2 Substitute Statements to Recipients for Certain Forms 1099-INT and 1099-DIV, and for Forms 1099-OID and 1099-PATR**

The rules in this section apply to Form 1099-INT (except for interest reportable under section 6041), 1099-DIV (except for section 404(k) dividends), 1099-OID, and 1099-PATR only. You may furnish form recipients with Copy B of the official Form 1099 or a substitute Form 1099 (form recipient statement) if it contains the same language as the official IRS form (such as aggregate amounts paid to the form recipient, any backup withholding, the name, address, and TIN of the person making the return, and any other information required by the official form). Except for state income tax withholding information, information not required by the official form should not be included on the substitute form.

You may enter a total of the individual accounts listed on the form only if they have been paid by the same payer. For example, if you are listing interest paid on several accounts by one financial institution on Form 1099-INT, you may also enter the total interest amount. You may also enter a date next to the corrected box if that box is checked.

A substitute form recipient statement for Forms 1099-INT, 1099-DIV, 1099-OID, or 1099-PATR must comply with the following requirements:

1. Box captions and numbers that are applicable must be clearly identified, using the same wording and numbering as on the official form.
   **Note.** For Form 1099-INT, if box 3 is not on your substitute form, you may drop “not included in box 3” from the box 1 caption.

2. The form recipient statement (Copy B) must contain all applicable form recipient instructions provided on the front and back of the official IRS form. You may provide those instructions on a separate sheet of paper.
3. The form recipient statement must contain the following in bold and conspicuous type:

   **This is important tax information and is being furnished to the Internal Revenue Service. 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.**
4. The box caption **"Federal income tax withheld"** must be in boldface type on the form recipient statement.
5. The form recipient statement must contain the Office of Management and Budget (OMB) number as shown on the official IRS form. See *Part 5.*
6. The form recipient statement must contain the tax year (for example, 2007), form number (for example, Form 1099-INT), and form name (for example, Interest Income) of the official IRS Form 1099. This information must be displayed prominently together in one area of the statement. For example, the tax year, form number, and form name could be shown in the upper right part of the statement. Each copy must be appropriately labeled (such as Copy B, For Recipient). See *Section 4.4* for applicable labels and arrangement of assembly of forms.
   **Note.** Do not include the words "Substitute for" or "In lieu of" on the form recipient statement.
7. Layout and format of the form is at the discretion of the filer. However, the IRS encourages the use of boxes so that the statement has the appearance of a form and can be easily distinguished from other non-tax statements.
8. Each recipient statement of Forms 1099-DIV, 1099-INT, 1099-OID, and 1099-PATR must include the direct access telephone number of an individual who can answer questions about the statement. Include that telephone number conspicuously anywhere on the recipient statement.
9. A mutual fund family may state separately on one document (for example, one piece of paper) the dividend income earned by a recipient from each fund within the family of funds as required by Form 1099-DIV. However, each fund and its earnings must be stated separately. The form must contain an instruction to the recipient that each fund's dividends and name, not the name of the mutual fund family, must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds. In addition, a mutual fund family may furnish a single statement (as a single filer) for Forms 1099-INT, 1099-DIV, and 1099-OID information. Each fund and its earnings must be stated separately. The form must contain an instruction to the recipient that each fund's earnings and name, not the name of the mutual fund family,

must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds.

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**4.1.3 Substitute Statements to Recipients for Certain Forms 1098, 1099, 5498, and W-2G**

Statements to form recipients for Forms 1098, 1098-C, 1098-E, 1098-T, 1099-A, 1099-B, 1099-C, 1099-CAP, 1099-G, 1099-H, 1099-LTC, 1099-MISC, 1099-Q, 1099-R, 1099-S, 1099-SA, 5498, 5498-ESA, 5498-SA, W-2G, 1099-DIV (only for section 404(k) dividends reportable under section 6047), and 1099-INT (only for interest of $600 or more made in the course of a trade or business reportable under section 6041) can be copies of the official forms or an acceptable substitute.

**Caution.** The IRS does not require a donee to use Form 1098-C as the written acknowledgment for contributions of motor vehicles, boats, and airplanes. However, if you choose to use copies of Form 1098-C or an acceptable substitute as the written acknowledgment, then you must follow the requirements of this section 4.1.3.

To be acceptable, a substitute form recipient statement must meet the following requirements.

1. The tax year, form number, and form name must be the same as the official form and must be displayed prominently together in one area on the statement. For example, they may be shown in the upper right part of the statement.
2. The filer's and the form recipient's identifying information required on the official IRS form must be included.
3. Each substitute recipient statement for Forms W-2G, 1098, 1098-C, 1098-E, 1098-T, 1099-A, 1099-B, 1099-CAP, 1099-DIV, 1099-G (excluding state and local income tax refunds), 1099-H, 1099-INT, 1099-LTC, 1099-MISC (excluding fishing boat proceeds), 1099-OID, 1099-PATR, 1099-Q, and 1099-S must include the direct access telephone number of an individual who can answer questions about the statement. Include the telephone number conspicuously anywhere on the recipient statement. Although not required, payers reporting on Forms 1099-C, 1099-R, 1099-SA, 5498, 5498-ESA, and 5498-SA are encouraged to furnish telephone numbers.
4. All applicable money amounts and information, including box numbers, required to be reported to the form recipient must be titled on the form recipient statement in substantially the same manner as those on the official IRS form. The box caption "Federal income tax withheld" must be in boldface type on the form recipient statement.
   **Exception.** If you are reporting a payment as "Other income" in box 3 of Form 1099-MISC, you may substitute appropriate language for the box title. For example, for payments of accrued wages and leave to a beneficiary of a deceased employee, you might change the title of box 3 to "Beneficiary payments" or something similar.

**Note.** You cannot make this change on Copy A.

**Note.** If federal income tax is withheld and shown on Form 1099-R or W-2G, Copy B and Copy C must be furnished to the recipient. If federal income tax is not withheld, only Copy C of Form 1099-R and W-2G must be furnished. However, for Form 1099-R, instructions similar to those on the back of the official Copy B and Copy C of Form 1099-R must be furnished to the recipient. For convenience, you may choose to provide both Copies B and C of Form 1099-R to the recipient.

5. You must provide appropriate instructions to the form recipient similar to those on the official IRS form, to aid in the proper reporting on the form recipient's income tax return. For payments reported on Forms 1099-B, and 1099-CAP, the requirement to include instructions substantially similar to those on the official IRS form may be satisfied by providing form recipients with a single set of instructions for all Forms 1099-B and 1099-CAP statements required to be furnished in a calendar year.
6. If you use carbonless sets to produce recipient statements, the quality of each copy in the set must meet the following standards:
   - All copies must be clearly legible,
   - All copies must be able to be photocopied, and
   - Fading must not diminish legibility and the ability to photocopy.

   In general, black chemical transfer inks are preferred, but other colors are permitted if the above standards are met. Hot wax and cold carbon spots are not permitted on any of the internal form plies. The back of a mailer top envelope ply may contain these spots.
7. A mutual fund family may state separately on one document (for example, one piece of paper) the Form 1099-B information for a recipient from each fund as required by Form 1099-B. However, the gross proceeds, etc., from each transaction within a fund must be stated separately. The form must contain an instruction to the recipient that each fund's (not the mutual fund family's) name and amount must be reported on the recipient's tax return. The form cannot contain an aggregate total of all funds.
8. You may use a Uniform Settlement Statement (under the Real Estate Settlement Procedures Act of 1974 (RESPA)) for Form 1099-S. The Uniform Settlement Statement is acceptable as the written statement to the transferor if you include the legend for Form 1099-S in *Section 4.3.2* and indicate which information on the Uniform Settlement Statement is being reported to the IRS on Form 1099-S.
9. For reporting state income tax withholding and state payments, you may add an additional box(es) to recipient copies as appropriate.

   **Note.** You cannot make this change on Copy A.
10. On Copy C of Form 1099-LTC, you may reverse the location of the policyholder's and the insured's name, street address, city, state, and ZIP code for easier mailing.

11. If an institution insurer uses a third party service provider to file Form 1098-T, then in addition to the institution or insurers name, address, and telephone number, the same information may be included for the third party service provider in the space provided on the form.

## Section 4.2 — Composite Statements

**4.2.1 Composite Substitute Statements for Certain Forms 1099-INT, 1099-DIV, 1099-MISC, and 1099-S, and for Forms 1099-OID and 1099-PATR**

A composite form recipient statement is permitted for reportable payments of interest, dividends, original issue discount, patronage dividends, and royalties (Forms 1099-INT (except for interest reportable under section 6041), 1099-DIV (except for section 404(k) dividends), 1099-MISC or 1099-S (for royalties only), 1099-OID, or 1099-PATR) when one payer is reporting more than one of these payments during a calendar year to the same form recipient. Generally, do not include any other Form 1099 information (for example, 1098 or 1099-A) on a composite statement with the information required on the forms listed in the preceding sentence.

**Exception.** A filer may include Form 1099-B information on a composite form with the forms listed above.

Although the composite form recipient statement may be on one sheet, the format of the composite form recipient statement must satisfy the following requirements in addition to the requirements listed earlier in *Section 4.1.2*.

- All information pertaining to a particular type of payment must be located and blocked together on the form and separate from any information covering other types of payments included on the form. For example, if you are reporting interest and dividends, the Form 1099-INT information must be presented separately from the Form 1099-DIV information.
- The composite form recipient statement must prominently display the tax year, form number, and form name of the official IRS form together in one area at the beginning of each appropriate block of information.
- Any information required by the official IRS forms that would otherwise be repeated in each information block is required to be listed only once in the first information block on the composite form. For example, there is no requirement to report the name of the filer in each information block. This rule does not apply to any money amounts (for example, federal income tax withheld) or to any other information that applies to money amounts.
- A composite statement is an acceptable substitute only if the type of payment and the recipient's tax obligation with respect to the payment are as clear as if each required statement were furnished separately on an official form.

**4.2.2 Composite Substitute Statements to Recipients for Forms Specified in Section 4.1.3**

A composite form recipient statement for the forms specified in *Section 4.1.3* is permitted when one filer is reporting more than one type of payment during a calendar year to the same form recipient. A composite statement is not allowed for a combination of forms listed in *Section 4.1.3* and forms listed in *Section 4.1.2*.

**Exceptions:**

- Substitute payments in lieu of dividends reported in Box 8 of Form 1099-MISC may be reported on a composite substitute statement with Form 1099-DIV.
- Form 1099-B information may be reported on a composite form with the forms specified in *Section 4.1.2* as described in *Section 4.2.1*.
- Forms 1099-A and 1099-C transactions, if related, may be combined on Form 1099-C.
- Royalties reported on Form 1099-MISC or 1099-S may be reported on a composite form only with the forms specified in Section 4.1.2.

Although the composite form recipient statement may be on one sheet, the format of the composite form recipient statement must satisfy the requirements listed in *Section 4.2.1* as well as the requirements in *Section 4.1.3*. A composite statement of Forms 1098 and 1099-INT (for interest reportable under section 6049) is not allowed.

## Section 4.3 — Required Legends

**4.3.1 Required Legends for Forms 1098**

Form 1098 recipient statements (Copy B) must contain the following legends:

- Form 1098—
  1. "The information in boxes 1, 2, 3, and 4 is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for this mortgage interest or for these points or because you did not report this refund of interest on your return."
  2. "**Caution.** The amount shown may not be fully deductible by you. Limits based on the loan amount and the cost and value of the secured property may apply. Also, you may only deduct interest to the extent it was incurred by you, actually paid by you, and not reimbursed by another person."
- Form 1098-C:
  Copy B — "In order to take a deduction of more than $500 for this contribution, you must attach this copy to your federal tax return."
  Copy C — "This information is being furnished to the Internal Revenue Service unless box 7 is checked."

- Form 1098-E — "This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if the IRS determines that an underpayment of tax results because you overstated a deduction for student loan interest."
- Form 1098-T — "This is important tax information and is being furnished to the Internal Revenue Service."

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**4.3.2 Required Legends for Forms 1099 and W-2G**

- Forms 1099-A, 1099-C, and 1099-CAP:
  Copy B — "This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported."
- Forms 1099-B, 1099-DIV, 1099-G, 1099-INT, 1099-MISC, 1099-OID, 1099-PATR, and 1099-Q:
  Copy B — "This is important tax information and is being furnished to the Internal Revenue Service. 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."
- Forms 1099-H:
  Copy B — "This is important tax information and is being furnished to the Internal Revenue Service."
- Form 1099-LTC:
  Copy B — "This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported."
  Copy C — "Copy C is provided to you for information only. Only the policyholder is required to report this information on a tax return."
- Form 1099-R:
  Copy B — "Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return."
  Copy C — "This information is being furnished to the Internal Revenue Service."
- Form 1099-S:
  Copy B — "This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this item is required to be reported and the IRS determines that it has not been reported."
- Form 1099-SA:

Copy B — "This information is being furnished to the Internal Revenue Service."

- Form W-2G:
  Copy B — "This information is being furnished to the Internal Revenue Service. Report this income on your federal tax return. If this form shows federal income tax withheld in box 2, attach this copy to your return."
  Copy C — "This is important tax information and is being furnished to the Internal Revenue Service. 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."

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**4.3.3 Required Legends for Forms 5498**

Form 5498 recipient statements (Copy B) must contain the following legends:

- Form 5498 — "This information is being furnished to the Internal Revenue Service."
  **Note.** If you do not furnish another statement to the participant because no contributions were made for the year, the statement of the fair market value and any required minimum distribution, of the account must contain this legend and a designation of which information is being furnished to the IRS.
- Form 5498-ESA — "The information in boxes 1 and 2 is being furnished to the Internal Revenue Service."
- Form 5498-SA — "The information in boxes 1 through 6 is being furnished to the Internal Revenue Service."

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## Section 4.4 — Miscellaneous Instructions for Copies B, C, D, 1, and 2

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**4.4.1 Copies**

Copies B, C, and in some cases, D, 1, and 2 are included in the official assembly for the convenience of the filer. You are not legally required to include all these copies with the privately printed substitute forms. Furnishing Copies B and, in some cases, C will satisfy the legal requirement to provide statements of information to form recipients.

**Note.** If an amount of federal income tax withheld is shown on Form 1099-R or W-2G, Copy B (to be attached to the tax return) and Copy C must be furnished to the recipient. Copy D (Forms 1099-R and W-2G) may be used for filer records. Only Copy A should be filed with the IRS.

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**4.4.2 Arrangement of Assembly**

Copy A ("For Internal Revenue Service Center") of all forms must be on top. The rest of the assembly must be arranged, from top to bottom, as follows. For:

- Form 1098 — Copy B "For Payer"; Copy C "For Recipient."
- Form 1098-C — Copy B "For Donor"; Copy C "For Donor's Records"; Copy D "For Donee."

- Form 1098-E — Copy B “For Borrower”; Copy C “For Recipient.”
- Form 1098-T — Copy B “For Student”; Copy C “For Filer.”
- Form 1099-A — Copy B “For Borrower”; Copy C “For Lender.”
- Forms 1099-B, 1099-DIV, 1099-G, 1099-H, 1099-INT, 1099-OID, 1099-PATR, 1099-Q, and 1099-SA — Copy B “For Recipient”; Copy C “For Payer.”
- Form 1099-C — Copy B “For Debtor”; Copy C “For Creditor.”
- Form 1099-CAP — Copy B “For Shareholder”; Copy C “For Corporation.”
- Form 1099-LTC — Copy B “For Policyholder”; Copy C “For Insured”; and Copy D “For Payer.”
- Form 1099-MISC — Copy 1 “For State Tax Department”; Copy B “For Recipient”; Copy 2 “To be filed with recipient’s state income tax return, when required”; and Copy C “For Payer.”
- Form 1099-R — Copy 1 “For State, City, or Local Tax Department”; Copy B “Report this income on your federal tax return. If this form shows federal income tax withheld in box 4, attach this copy to your return”; Copy C “For Recipient’s Records”; Copy 2 “File this copy with your state, city, or local income tax return, when required”; Copy D “For Payer.”
- Form 1099-S — Copy B “For Transferor”; Copy C “For Filer.”
- Form 5498 — Copy B “For Participant”; Copy C “For Trustee or Issuer.”
- Form 5498-ESA — Copy B “For Beneficiary”; Copy C “For Trustee.”
- Form 5498-SA — Copy B “For Participant”; Copy C “For Trustee.”
- Form W-2G — Copy 1 “For State Tax Department”; Copy B “Report this income on your federal tax return. If this form shows federal income tax withheld in box 2, attach this copy to your return”; Copy C “For Winner’s Records”; Copy 2 “Attach this copy to your state income tax return, if required.”; Copy D “For Payer.”

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**4.4.3 Perforations**

Perforations are required between forms on all copies except Copy A to make separating the forms easier. (Copy A of Form W-2G may be perforated.)

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## Section 4.5 — Electronic Delivery of Form 1099 and Form 5498 Payee Statements

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**4.5.1 Electronic Recipient Statements**

If you are required to furnish a written statement (Copy B or an acceptable substitute) to a recipient, then you may furnish the statement electronically instead of on paper. This includes furnishing the statement to recipients of Forms 1098, 1098-E, 1098-T, 1099-A, B, C, CAP, DIV, H, INT, G, LTC, MISC, OID, PATR, Q, R, S, SA, 5498, 5498-ESA, and 5498-SA. It also includes Form W-2G (except for horse and dog racing, jai alai, sweepstakes, wagering pools, and lotteries).

**Note.** Until further guidance is issued, you can not furnish Form 1098-C electronically.

If you meet the requirements listed below, you are treated as furnishing the statement timely.

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***Consent***

The recipient must consent in the affirmative and not have withdrawn the consent before the statement is furnished. The consent by the recipient must be made electronically in a way that shows that he or she can access the statement in the electronic format in which it will be furnished.

You must notify the recipient of any hardware or software changes prior to furnishing the statement. A new consent to receive the statement electronically is required after the new hardware or software is put into service.

Prior to furnishing the statements electronically, you must provide the recipient a statement with the following statements prominently displayed:

- If the recipient does not consent to receive the statement electronically, a paper copy will be provided.
- The scope and duration of the consent. For example, whether the consent applies to every year the statement is furnished or only for the January 31 immediately following the date of the consent.
- How to obtain a paper copy after giving consent.
- How to withdraw the consent. The consent may be withdrawn at any time by furnishing the withdrawal in writing (electronically or on paper) to the person whose name appears on the statement. Confirmation of the withdrawal also will be in writing (electronically or on paper).
- Notice of termination. The notice must state under what conditions the statements will no longer be furnished to the recipient.
- Procedures to update the recipient's information.
- A description of the hardware and software required to access, print and retain a statement, and a date the statement will no longer be available on the website.

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***Format, Posting, and Notification***

Additionally, you must:

- Ensure the electronic format contains all the required information and complies with the guidelines in this document.
- Post, on or before the January 31 due date, the applicable statement on a website accessible to the recipient through October 15 of that year.
- Inform the recipient, electronically or by mail, of the posting and how to access and print the statement.

For more information, see Regulations section 31.6051-1. For electronic furnishing of Forms 1098-E and 1098-T, see Regulations section 1.6050S-2.

For electronic furnishing of Forms 1099-R, 1099-SA, 1099-Q, 5498, 5498-ESA, and 5498-SA, see Notice 2004-10, 2004-1 C.B. 433.

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# Part 5
# Additional Instructions for Substitute Forms 1098, 1099, 5498, W-2G, and 1042-S

## Section 5.1 — Paper Substitutes for Form 1042-S

**5.1.1 Paper Substitutes**

Paper substitutes of Copy A for Form 1042-S, *Foreign Person's U.S. Source Income Subject to Withholding*, that totally conform to the specifications contained in this procedure may be privately printed without prior approval from the Internal Revenue Service. Proposed substitutes not conforming to these specifications must be submitted for consideration.

**Note.** Copies B, C, D, and E of Form 1042-S may contain multiple income entries for the same recipient, that is multiple rows of the top boxes 1-8 of the form.

**5.1.2 Time Frame For Submission of Form 1042-S**

The request should be submitted by November 15 of the year prior to the year the form is to be used. This is to allow the Service adequate time to respond and the submitter adequate time to make any corrections. These requests should contain a copy of the proposed form, the need for the specific deviation(s), and the number of information returns to be printed.

**5.1.3 Revisions**

Form 1042-S is subject to annual review and possible change. Withholding agents and form suppliers are cautioned against overstocking supplies of the privately printed substitutes.

**5.1.4 Obtaining Copies**

Copies of the official form for the reporting year may be obtained from most Service offices. The Service provides only cut sheets (no carbon interleaves) of these forms. Continuous fan-fold/pin-fed forms are not provided.

**5.1.5 Instructions For Withholding Agents**

Instructions for withholding agents:

- Only original copies may be filed with the Service. Carbon copies and reproductions are not acceptable.
- The term "Recipient's U.S. TIN" for an individual means the social security number (SSN) or IRS individual taxpayer identification number (ITIN), consisting of nine digits separated by hyphens as follows: 000-00-0000. For all other recipients, the term means employer identification number (EIN) or qualified intermediary employer identification number (QI-EIN). The QI-EIN designation includes a withholding foreign partnership employer identification number (WP-EIN) and a withholding foreign trust employer identification number (WT-EIN). The EIN and QI-EIN consist of nine digits separated

by a hyphen as follows: 00-0000000. The taxpayer identification number (TIN) must be in one of these formats.

- Withholding agents are requested to type or machine print whenever possible, provide quality data entries on the forms (that is, use black ribbon and insert data in the middle of blocks well separated from other printing and guidelines), and take other measures to guarantee a clear, sharp image. Withholding agents are not required, however, to acquire special equipment solely for the purpose of preparing these forms.
- The "AMENDED" and "PRO-RATA BASIS REPORTING" boxes must be printed at the top center of the form under the title and checked, if applicable.
- Substitute forms prepared in continuous or strip form must be burst and stripped to conform to the size specified for a single form before they are filed with the Service. The dimensions are found below. Computer cards are acceptable provided they meet all requirements regarding layout, content, and size.

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**5.1.6 Substitute Form 1042-S Format Requirements**

| Property | Substitute Form 1042-S Format Requirements |
|---|---|
| Printing | Privately printed substitute Forms 1042-S must be exact replicas of the official forms with respect to layout and content. Only the dimensions of the substitute form may differ. The Government Printing Office (GPO) symbol must be deleted. The exact dimensions are found below. |
| Box Entries | Only one item of income may be represented on the copy submitted to the Service (Copy A). Multiple income items may be shown on copies provided to recipients or retained by withholding agent. All boxes appearing on the official form must be present on the substitute form, with appropriate captions. |
| Color and Quality of Ink | All printing must be in high quality non-gloss black ink. Bar codes should be free from picks and voids. |
| Typography | Type must be substantially identical in size and shape to corresponding type on the official form. All rules on the document are either 1 point (0.015") or 3 point (0.045"). Vertical rules must be parallel to the left edge of the document; horizontal rules must be parallel to the top edge. |
| Carbons | Carbonized forms or "spot carbons" are not permissible. Interleaved carbons, if used, must be of good quality to preclude smudging and should be black. |

| Property | Substitute Form 1042-S Format Requirements |
|---|---|
| Assembly | If all five parts are present, the parts of the assembly shall be arranged from top to bottom as follows: Copy A (Original) "for Internal Revenue Service," Copies B, C, and D "for Recipient," and Copy E "for Withholding Agent." |
| Color Quality of Paper | • Paper for Copy A must be white chemical wood bond, or equivalent, 20 pound (basis 17 x 22–500), plus or minus 5 percent; or offset book paper, 50 pound (basis 25 x 38–500). No optical brighteners may be added to the pulp or paper during manufacture. The paper must consist of principally bleach chemical wood pulp or recycled printed paper. It also must be suitably sized to accept ink without feathering.<br>• Copies B, C, D (for Recipient), and E (for Withholding Agent) are provided in the official assembly solely for the convenience of the withholding agent. Withholding agents may choose the format, design, color, and quality of the paper used for these copies. |
| Dimensions | • The official form is 8 inches wide x 5 1/2 inches deep, exclusive of a 1/2 inch snap stub on the left side of the form. The snap feature is not required on substitutes.<br>• The width of a substitute Copy A must be a minimum of 7 inches and a maximum of 8 inches, although adherence to the size of the official form is preferred. If the width of substitute Copy A is reduced from that of the official form, the width of each field on the substitute form must be reduced proportionately. The left margin must be 1/2 inch and free of all printing other than that shown on the official form.<br>• The depth of a substitute Copy A must be a minimum of 5 1/6 inches and a maximum of 5 1/2 inches. |
| Other Copies | Copies B, C, and D must be furnished for the convenience of payees who must send a copy of the form with other federal and state returns they file. Copy E may be used as a withholding agent's record/copy. |

## Section 5.2 — OMB Requirements for All Forms in This Revenue Procedure

**5.2.1 OMB Requirements**

The Paperwork Reduction Act (the Act) of 1995 (Public Law 104-13) requires that:

- OMB approves all IRS tax forms that are subject to the Act. Each IRS form contains (in or near the upper right corner) the OMB approval number, if any. (The official OMB numbers may be found on the official IRS printed forms and are also shown on the forms in the exhibits in *Part 6*.)
- Each IRS form (or its instructions) states:
  1. Why the IRS needs the information,
  2. How it will be used, and
  3. Whether or not the information is required to be furnished to the IRS.

This information must be provided to any users of official or substitute IRS forms or instructions.

**5.2.2 Substitute Form Requirements**

The OMB requirements for substitute IRS forms are:

- Any substitute form or substitute statement to a recipient must show the OMB number as it appears on the official IRS form.
- For Copy A, the OMB number must appear exactly as shown on the official IRS form.
- For any copy other than Copy A, the OMB number must use one of the following formats.
  1. OMB No. XXXX-XXXX (preferred) or
  2. OMB # XXXX-XXXX (acceptable).

**5.2.3 Required Explanation to Users**

All substitute forms (Copy A only) must state "For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G." (or "For Privacy Act and Paperwork Reduction Act Notice, see separate instructions." for Copy A of Form 1042-S).

If no instructions are provided to users of your forms, you must furnish them with the exact text of the Privacy Act and Paperwork Reduction Act Notice.

## Section 5.3 — Reproducible Copies of Forms

**5.3.1 Introduction**

You can order official IRS forms and publications by calling 1-800-TAX-FORM (1-800-829-3676). Other ways to get federal tax material include:

- The Internet.
- CD.
- GPO Superintendent of Documents Bookstores.

**Note.** Several IRS forms are provided electronically on the IRS home page and on the IRS Federal Tax Forms CD, but Form 1096, Copy A of the 1098 series, 1099 series, and 5498 series cannot be used for filing with the IRS when printed from a conventional printer. These forms contain drop-out ink requirements as described in Part 2 of this publication.

**5.3.2 Internet**

You can download tax materials from the Internet by visiting the IRS web site at *www.irs.gov*.

**5.3.3 IRS Federal Tax Forms CD**

The IRS also offers an alternative to downloading electronic files and provides current and prior-year access to tax forms and instructions through its *IRS Federal Tax Forms CD*. The CD, Pub. 1796, *IRS Federal Tax Products CD*, will be available for the upcoming filing season. You may buy the CD on the Internet at *www.irs.gov/cdorders* or by calling 1-877-CDFORMS (1-877-233-6767).

**5.3.4 GPO Supt. of Documents Bookstores**

The Government Printing Office (GPO) Superintendent of Documents Bookstores also sell individual copies of tax forms, instructions, and publications.

## Section 5.4 — Effect on Other Revenue Procedures

**5.4.1 Other Revenue Procedures**

Revenue Procedure 2007-15, 2007-3 I.R.B. 300, dated January 16, 2007, which provides rules and specifications for private printing of 2006 substitute forms and statements to recipients, is superseded.

# Part 6
# Exhibits

## Section 6.1 — Exhibits of Forms in the Revenue Procedure

**6.1.1 Purpose**

Exhibits A through Z illustrate some of the specifications that were discussed earlier in this revenue procedure. The dimensions apply to the actual size forms, but the exhibits have been reduced in size.

Generally, the illustrated dimensions apply to all like forms. For example, Exhibit B shows 11.00” from the top edge to the bottom edge of Form 1098 and .85” between the bottom rule of the top form and the top rule of the second form on the page. These dimensions apply to all forms that are printed three to a page.

**6.1.2 Guidelines**

Keep in mind the following guidelines when printing substitute forms.

- Closely follow the specifications to avoid delays in processing the forms.
- Always use the specifications as outlined in this revenue procedure and illustrated in the exhibits.
- Do not add the text line “Do Not Cut or Separate Forms on This Page” to the bottom form. This will cause inconsistency with the specifications.

# Exhibit A

.50"

Do Not Staple 6969

Form **1096**

Department of the Treasury
Internal Revenue Service

**Annual Summary and Transmittal of U.S. Information Returns**

OMB No. 1545-0108

**2007**

FILER'S name

Street address (including room or suite number)

City, state, and ZIP code

1.33" 2.25" 7.30" 4.50"

| Name of person to contact | Telephone number ( ) |
|---|---|
| Email address | Fax number ( ) |

**For Official Use Only** .35"

| 1 Employer identification number | 2 Social security number | 3 Total number of forms | 4 Federal income tax withheld | 5 Total amount reported with this Form 1096 |
|---|---|---|---|---|
| 1.40" | 1.40" | 1.20" | $ 1.40" | $ 1.90" |

Enter an "X" in only one box below to indicate the type of form being filed. If this is your **final return**, enter an "X" here . . ▶ ☐ .25"

| W-2G 32 | 1098 81 | 1098-C 78 | 1098-E 84 | 1098-T 83 | 1099-A 80 | 1099-B 79 | 1099-C 85 | 1099-CAP 73 | 1099-DIV 91 | 1099-G 86 | 1099-H 71 | 1099-INT 92 | 1099-LTC 93 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

| 1099-MISC 95 | 1099-OID 96 | 1099-PATR 97 | 1099-Q 31 | 1099-R 98 | 1099-S 75 | 1099-SA 94 | 5498 28 | 5498-ESA 72 | 5498-SA 27 |
|---|---|---|---|---|---|---|---|---|---|
| ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**Return this entire page to the Internal Revenue Service. Photocopies are not acceptable.**

Under penalties of perjury, I declare that I have examined this return and accompanying documents, and, to the best of my knowledge and belief, they are true, correct, and complete.

8.00"

**Signature ▶** **Title ▶** **Date ▶**

11.0"

## Instructions

**Purpose of form.** Use this form to transmit paper Forms 1099, 1098, 5498, and W-2G to the Internal Revenue Service. Do not use Form 1096 to transmit electronically or magnetically. For magnetic media, see Form 4804, Transmittal of Information Returns Reported Magnetically; for electronic submissions, see Pub. 1220, Specifications for Filing Forms 1098, 1099, 5498, and W-2G Electronically or Magnetically.

**Who must file.** The name, address, and TIN of the filer on this form must be the same as those you enter in the upper left area of Forms 1099, 1098, 5498, or W-2G. A filer includes a payer; a recipient of mortgage interest payments (including points) or student loan interest; an educational institution; a broker; a barter exchange; a creditor; a person reporting real estate transactions; a trustee or issuer of any individual retirement arrangement, a Coverdell ESA, an HSA, an Archer MSA (including a Medicare Advantage MSA); certain corporations; certain donees of motor vehicles, boats, and airplanes; and a lender who acquires an interest in secured property or who has reason to know that the property has been abandoned.

**Preaddressed Form 1096.** If you received a preaddressed Form 1096 from the IRS with Package 1099, use it to transmit paper Forms 1099, 1098, 5498, and W-2G to the Internal Revenue Service. If any of the preprinted information is incorrect, make corrections on the form.

If you are not using a preaddressed form, enter the filer's name, address (including room, suite, or other unit number), and TIN in the spaces provided on the form.

**When to file.** File Form 1096 as follows.

- With Forms 1099, 1098, or W-2G, file by February 28, 2008.
- With Forms 5498, 5498-ESA, or 5498-SA, file by June 2, 2008.

## Where To File

Except for Form 1098-C, send all information returns filed on paper with Form 1096 to the following:

| If your principal business, office or agency, or legal residence in the case of an individual, is located in | Use the following Internal Revenue Service Center address |
|---|---|
| Alabama, Arizona, Arkansas, Connecticut, Delaware, Florida, Georgia, Kentucky, Louisiana, Maine, Massachusetts, Mississippi, New Hampshire, New Jersey, New Mexico, New York, North Carolina, Ohio, Pennsylvania, Rhode Island, Texas, Vermont, Virginia, West Virginia | Austin, TX 73301 |
| Alaska, California, Colorado, District of Columbia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Maryland, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, North Dakota, Oklahoma, Oregon, South Carolina, South Dakota, Tennessee, Utah, Washington, Wisconsin, Wyoming | Kansas City, MO 64999 |

**For more information and the Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Cat. No. 14400O Form **1096** (2007)

# Exhibit B

8181 ☐ VOID ☐ CORRECTED

.65" .33" .50" 4.75"

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-0901 **2007** Form **1098** | **Mortgage Interest Statement** |
|---|---|---|---|
| RECIPIENT'S federal identification no. (1.70") | PAYER'S social security number | 1 Mortgage interest received from payer(s)/borrower(s) $ (2.80") | **Copy A For Internal Revenue Service Center File with Form 1096.** (.25") |
| PAYER'S/BORROWER'S name (3.40") | | 2 Points paid on purchase of principal residence $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| Street address (including apt. no.) | | 3 Refund of overpaid interest $ | |
| City, state, and ZIP code | | 4 Mortgage insurance premiums $ (2.83") | |
| Account number (see instructions) | | 5 | |

3.33"

Form **1098** Cat. No. 14402K Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

7.30" 8.00" .85"

8181 ☐ VOID ☐ CORRECTED

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-0901 **2007** Form **1098** | **Mortgage Interest Statement** |
|---|---|---|---|
| RECIPIENT'S federal identification no. | PAYER'S social security number | 1 Mortgage interest received from payer(s)/borrower(s) $ | **Copy A For Internal Revenue Service Center File with Form 1096.** |
| PAYER'S/BORROWER'S name | | 2 Points paid on purchase of principal residence $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| Street address (including apt. no.) | | 3 Refund of overpaid interest $ | |
| City, state, and ZIP code | | 4 Mortgage insurance premiums $ | |
| Account number (see instructions) | | 5 | |

Form **1098** Cat. No. 14402K Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

11.00"

8181 ☐ VOID ☐ CORRECTED

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-0901 **2007** Form **1098** | **Mortgage Interest Statement** |
|---|---|---|---|
| RECIPIENT'S federal identification no. | PAYER'S social security number | 1 Mortgage interest received from payer(s)/borrower(s) $ | **Copy A For Internal Revenue Service Center File with Form 1096.** |
| PAYER'S/BORROWER'S name | | 2 Points paid on purchase of principal residence $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| Street address (including apt. no.) | | 3 Refund of overpaid interest $ | |
| City, state, and ZIP code | | 4 Mortgage insurance premiums $ | |
| Account number (see instructions) | | 5 | |

Form **1098** Cat. No. 14402K Department of the Treasury - Internal Revenue Service

# Exhibit C

7878 ☐ CORRECTED

| | | |
|---|---|---|
| DONEE'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of contribution | OMB No. 1545-1959<br>2007<br>Form 1098-C |
| | 2 Make, model, and year of vehicle (2.80") | |
| DONEE'S federal identification number (3.40") / DONOR'S identification number | 3 Vehicle or other identification number | |
| DONOR'S name | 4a ☐ Donee certifies that vehicle was sold in arm's length transaction to unrelated party | |
| Street address (including apt. no.) | 4b Date of sale | |
| City, state, and ZIP code | 4c Gross proceeds from sale (see instructions) $ | |

**Contributions of Motor Vehicles, Boats, and Airplanes**

5a ☐ Donee certifies that vehicle will not be transferred for money, other property, or services before completion of material improvements or significant intervening use

5b ☐ Donee certifies that vehicle is to be transferred to a needy individual for significantly below fair market value in furtherance of donee's charitable purpose (7.16")

5c Donee certifies the following detailed description of material improvements or significant intervening use and duration of use

6a Did you provide goods or services in exchange for the vehicle? . . . . . ► Yes ☐ No ☐

6b Value of goods and services provided in exchange for the vehicle $

6c Describe the goods and services, if any, that were provided. If this box is checked, donee certifies that the goods and services consisted solely of intangible religious benefits . . . . . ► ☐

7 Under the law, the donor may not claim a deduction of more than $500 for this vehicle if this box is checked . . . . ► ☐

**Copy A**

**For Internal Revenue Service Center**

**File with Form 1096.**

For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1098-C** Cat. No. 39732R Department of the Treasury - Internal Revenue Service

# Exhibit D

8484 ☐ VOID ☐ CORRECTED

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-1576<br>2007<br>Form 1098-E | Student Loan Interest Statement |
|---|---|---|---|
| RECIPIENT'S federal identification no. | BORROWER'S social security number | 1 Student loan interest received by lender<br>$ 2.80" | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BORROWER'S name<br>3.40" | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code 2.83" | | | |
| Account number (see instructions) | | 2 Check if box 1 includes loan origination fees and/or capitalized interest . . . . . ☐ | |

Form **1098-E** Cat. No. 25088U Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8484 ☐ VOID ☐ CORRECTED

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-1576<br>2007<br>Form 1098-E | Student Loan Interest Statement |
|---|---|---|---|
| RECIPIENT'S federal identification no. | BORROWER'S social security number | 1 Student loan interest received by lender<br>$ | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BORROWER'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | 2 Check if box 1 includes loan origination fees and/or capitalized interest . . . . . ☐ | |

Form **1098-E** Cat. No. 25088U Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8484 ☐ VOID ☐ CORRECTED

| RECIPIENT'S/LENDER'S name, address, and telephone number | | OMB No. 1545-1576<br>2007<br>Form 1098-E | Student Loan Interest Statement |
|---|---|---|---|
| RECIPIENT'S federal identification no. | BORROWER'S social security number | 1 Student loan interest received by lender<br>$ | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BORROWER'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | 2 Check if box 1 includes loan origination fees and/or capitalized interest . . . . . ☐ | |

Form **1098-E** Cat. No. 25088U Department of the Treasury - Internal Revenue Service

# Exhibit E

.33"

8383 ☐ VOID ☐ CORRECTED 6.25"

| | | | |
|---|---|---|---|
| FILER'S name, street address, city, state, ZIP code, and telephone number | 1 Payments received for qualified tuition and related expenses $ | OMB No. 1545-1574 | **Tuition Statement** |
| | 2 Amounts billed for qualified tuition and related expenses $ | **2007** Form **1098-T** | |
| FILER'S federal identification no. / STUDENT'S social security number | 3 Check if you have changed your reporting method for 2007 ☐ | | **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| STUDENT'S name (3.40") | 4 Adjustments made for a prior year $ | 5 Scholarships or grants $ (1.40") | |
| Street address (including apt. no.) | 6 Adjustments to scholarships or grants for a prior year $ (2.80") | 7 Check this box if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2008 ► ☐ | |
| City, state, and ZIP code | | | |
| Service Provider/Acct. No. (see instr.) / 8 Check if at least half-time student ☐ | 9 Check if a graduate student . . . ☐ | 10 Ins. contract reimb./refund $ | |

.25"

Form **1098-T** Cat. No. 25087J Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8383 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| FILER'S name, street address, city, state, ZIP code, and telephone number | 1 Payments received for qualified tuition and related expenses $ | OMB No. 1545-1574 | **Tuition Statement** |
| | 2 Amounts billed for qualified tuition and related expenses $ | **2007** Form **1098-T** | |
| FILER'S federal identification no. / STUDENT'S social security number | 3 Check if you have changed your reporting method for 2007 ☐ | | **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| STUDENT'S name | 4 Adjustments made for a prior year $ | 5 Scholarships or grants $ | |
| Street address (including apt. no.) | 6 Adjustments to scholarships or grants for a prior year $ | 7 Check this box if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2008 ► ☐ | |
| City, state, and ZIP code | | | |
| Service Provider/Acct. No. (see instr.) / 8 Check if at least half-time student ☐ | 9 Check if a graduate student . . . ☐ | 10 Ins. contract reimb./refund $ | |

Form **1098-T** Cat. No. 25087J Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8383 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| FILER'S name, street address, city, state, ZIP code, and telephone number | 1 Payments received for qualified tuition and related expenses $ | OMB No. 1545-1574 | **Tuition Statement** |
| | 2 Amounts billed for qualified tuition and related expenses $ | **2007** Form **1098-T** | |
| FILER'S federal identification no. / STUDENT'S social security number | 3 Check if you have changed your reporting method for 2007 ☐ | | **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| STUDENT'S name | 4 Adjustments made for a prior year $ | 5 Scholarships or grants $ | |
| Street address (including apt. no.) | 6 Adjustments to scholarships or grants for a prior year $ | 7 Check this box if the amount in box 1 or 2 includes amounts for an academic period beginning January - March 2008 ► ☐ | |
| City, state, and ZIP code | | | |
| Service Provider/Acct. No. (see instr.) / 8 Check if at least half-time student ☐ | 9 Check if a graduate student . . . ☐ | 10 Ins. contract reimb./refund $ | |

Form **1098-T** Cat. No. 25087J Department of the Treasury - Internal Revenue Service

# Exhibit F

8080 ☐ VOID ☐ CORRECTED

| | | |
|---|---|---|
| LENDER'S name, street address, city, state, ZIP code, and telephone no. | | OMB No. 1545-0877<br>2007<br>Form 1099-A<br>**Acquisition or Abandonment of Secured Property** |
| LENDER'S federal identification number / BORROWER'S identification number | 1 Date of lender's acquisition or knowledge of abandonment | 2 Balance of principal outstanding<br>$ |
| BORROWER'S name | 3 | 4 Fair market value of property<br>$ 1.40" |
| Street address (including apt. no.) | 5 Was borrower personally liable for repayment of the debt? ☐ Yes ☐ No | 1.40" |
| City, state, and ZIP code | 6 Description of property | 1.80" |
| Account number (see instructions) | | |

**Copy A**
**For Internal Revenue Service Center**
**File with Form 1096.**
For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-A** Cat. No. 14412G Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8080 ☐ VOID ☐ CORRECTED

| | | |
|---|---|---|
| LENDER'S name, street address, city, state, ZIP code, and telephone no. | | OMB No. 1545-0877<br>2007<br>Form 1099-A<br>**Acquisition or Abandonment of Secured Property** |
| LENDER'S federal identification number / BORROWER'S identification number | 1 Date of lender's acquisition or knowledge of abandonment | 2 Balance of principal outstanding<br>$ |
| BORROWER'S name | 3 | 4 Fair market value of property<br>$ |
| Street address (including apt. no.) | 5 Was borrower personally liable for repayment of the debt? ☐ Yes ☐ No | |
| City, state, and ZIP code | 6 Description of property | |
| Account number (see instructions) | | |

**Copy A**
**For Internal Revenue Service Center**
**File with Form 1096.**
For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-A** Cat. No. 14412G Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8080 ☐ VOID ☐ CORRECTED

| | | |
|---|---|---|
| LENDER'S name, street address, city, state, ZIP code, and telephone no. | | OMB No. 1545-0877<br>2007<br>Form 1099-A<br>**Acquisition or Abandonment of Secured Property** |
| LENDER'S federal identification number / BORROWER'S identification number | 1 Date of lender's acquisition or knowledge of abandonment | 2 Balance of principal outstanding<br>$ |
| BORROWER'S name | 3 | 4 Fair market value of property<br>$ |
| Street address (including apt. no.) | 5 Was borrower personally liable for repayment of the debt? ☐ Yes ☐ No | |
| City, state, and ZIP code | 6 Description of property | |
| Account number (see instructions) | | |

**Copy A**
**For Internal Revenue Service Center**
**File with Form 1096.**
For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-A** Cat. No. 14412G Department of the Treasury - Internal Revenue Service

# Exhibit G

7979 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1a Date of sale or exchange | OMB No. 1545-0715 | Proceeds From Broker and Barter Exchange Transactions |
|---|---|---|---|
| | 1b CUSIP no. | 2007 Form 1099-B | |
| | 2 Stocks, bonds, etc. $ | Reported to IRS ☐ Gross proceeds ☐ Gross proceeds less commissions and option premiums | |
| PAYER'S federal identification number / RECIPIENT'S identification number | 3 Bartering $ | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center |
| RECIPIENT'S name | 5 No. of shares exchanged | 6 Classes of stock exchanged | File with Form 1096. |
| Street address (including apt. no.) | 7 Description | | For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| City, state, and ZIP code | 8 Profit or (loss) realized in 2007 $ | 9 Unrealized profit or (loss) on open contracts—12/31/2006 $ | |
| CORPORATION'S name | 10 Unrealized profit or (loss) on open contracts–12/31/2007 $ | 11 Aggregate profit or (loss) $ | |
| Account number (see instructions) / 2nd TIN not. ☐ | 12 Check the box if recipient cannot take a loss on their tax return based on the amount in box 2 . . . . ☐ | | |

Form **1099-B** Cat. No. 14411V Department of the Treasury - Internal Revenue Service


7979 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1a Date of sale or exchange | OMB No. 1545-0715 | Proceeds From Broker and Barter Exchange Transactions |
|---|---|---|---|
| | 1b CUSIP no. | 2007 Form 1099-B | |
| | 2 Stocks, bonds, etc. $ | Reported to IRS ☐ Gross proceeds ☐ Gross proceeds less commissions and option premiums | |
| PAYER'S federal identification number / RECIPIENT'S identification number | 3 Bartering $ | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center |
| RECIPIENT'S name | 5 No. of shares exchanged | 6 Classes of stock exchanged | File with Form 1096. |
| Street address (including apt. no.) | 7 Description | | For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| City, state, and ZIP code | 8 Profit or (loss) realized in 2007 $ | 9 Unrealized profit or (loss) on open contracts—12/31/2006 $ | |
| CORPORATION'S name | 10 Unrealized profit or (loss) on open contracts–12/31/2007 $ | 11 Aggregate profit or (loss) $ | |
| Account number (see instructions) / 2nd TIN not. ☐ | 12 Check the box if recipient cannot take a loss on their tax return based on the amount in box 2 . . . . ☐ | | |

Form **1099-B** Cat. No. 14411V Department of the Treasury - Internal Revenue Service

# Exhibit H

8585 ☐ VOID ☐ CORRECTED

| CREDITOR'S name, street address, city, state, and ZIP code | | OMB No. 1545-1424 2007 Form 1099-C | Cancellation of Debt |
|---|---|---|---|
| CREDITOR'S federal identification number / DEBTOR'S identification number | 1 Date canceled (1.40") | 2 Amount of debt canceled $ (1.40") | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. (1.35") |
| DEBTOR'S name (3.40") | 3 Interest if included in box 2 $ | 4 | |
| Street address (including apt. no.) | 5 Debt description | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | 6 Check for bankruptcy ☐ | 7 Fair market value of property $ | |

Form **1099-C** Cat. No. 26280W Department of the Treasury - Internal Revenue Service

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8585 ☐ VOID ☐ CORRECTED

| CREDITOR'S name, street address, city, state, and ZIP code | | OMB No. 1545-1424 2007 Form 1099-C | Cancellation of Debt |
|---|---|---|---|
| CREDITOR'S federal identification number / DEBTOR'S identification number | 1 Date canceled | 2 Amount of debt canceled $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| DEBTOR'S name | 3 Interest if included in box 2 $ | 4 | |
| Street address (including apt. no.) | 5 Debt description | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | 6 Check for bankruptcy ☐ | 7 Fair market value of property $ | |

Form **1099-C** Cat. No. 26280W Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

8585 ☐ VOID ☐ CORRECTED

| CREDITOR'S name, street address, city, state, and ZIP code | | OMB No. 1545-1424 2007 Form 1099-C | Cancellation of Debt |
|---|---|---|---|
| CREDITOR'S federal identification number / DEBTOR'S identification number | 1 Date canceled | 2 Amount of debt canceled $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| DEBTOR'S name | 3 Interest if included in box 2 $ | 4 | |
| Street address (including apt. no.) | 5 Debt description | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | 6 Check for bankruptcy ☐ | 7 Fair market value of property $ | |

Form **1099-C** Cat. No. 26280W Department of the Treasury - Internal Revenue Service

# Exhibit I

7373 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| CORPORATION'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of sale or exchange | OMB No. 1545-1814 | **Changes in Corporate Control and Capital Structure** |
| | 2 Aggregate amount received $ (1.40") | 2007 Form **1099-CAP** | |
| | 3 No. of shares exchanged | 4 Classes of stock exchanged (1.40") | (1.35") **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| CORPORATION'S federal identification no. / SHAREHOLDER'S identification no. | | | |
| SHAREHOLDER'S name | | | |
| Street address (including apt. no.) | 5 | | |
| City, state, and ZIP code (3.40") | | | |
| Account number (see instructions) | 6 Check the box if this shareholder cannot claim a loss based on the amount in box 2 . . . . . ☐ | | |

Form **1099-CAP** Cat. No. 35115M Department of the Treasury - Internal Revenue Service

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7373 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| CORPORATION'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of sale or exchange | OMB No. 1545-1814 | **Changes in Corporate Control and Capital Structure** |
| | 2 Aggregate amount received $ | 2007 Form **1099-CAP** | |
| | 3 No. of shares exchanged | 4 Classes of stock exchanged | **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| CORPORATION'S federal identification no. / SHAREHOLDER'S identification no. | | | |
| SHAREHOLDER'S name | | | |
| Street address (including apt. no.) | 5 | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | 6 Check the box if this shareholder cannot claim a loss based on the amount in box 2 . . . . . ☐ | | |

Form **1099-CAP** Cat. No. 35115M Department of the Treasury - Internal Revenue Service

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7373 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| CORPORATION'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of sale or exchange | OMB No. 1545-1814 | **Changes in Corporate Control and Capital Structure** |
| | 2 Aggregate amount received $ | 2007 Form **1099-CAP** | |
| | 3 No. of shares exchanged | 4 Classes of stock exchanged | **Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| CORPORATION'S federal identification no. / SHAREHOLDER'S identification no. | | | |
| SHAREHOLDER'S name | | | |
| Street address (including apt. no.) | 5 | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | 6 Check the box if this shareholder cannot claim a loss based on the amount in box 2 . . . . . ☐ | | |

Form **1099-CAP** Cat. No. 35115M Department of the Treasury - Internal Revenue Service

# Exhibit J

9191 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1a Total ordinary dividends $ | OMB No. 1545-0110 | **Dividends and Distributions** |
| | 1b Qualified dividends $ (1.40") | 2007 Form **1099-DIV** | |
| | 2a Total capital gain distr. $ | 2b Unrecap. Sec. 1250 gain $ | **Copy A For Internal Revenue Service Center** **File with Form 1096.** |
| PAYER'S federal identification number / RECIPIENT'S identification number | | | |
| RECIPIENT'S name | 2c Section 1202 gain $ | 2d Collectibles (28%) gain $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| | 3 Nondividend distributions $ | 4 Federal income tax withheld $ | |
| Street address (including apt. no.) | | 5 Investment expenses $ | |
| City, state, and ZIP code | 6 Foreign tax paid $ | 7 Foreign country or U.S. possession | |
| Account number (see instructions) / 2nd TIN not. ☐ (2.80") | 8 Cash liquidation distributions $ | 9 Noncash liquidation distributions $ (4.50") | |

Form **1099-DIV** Cat. No. 14415N Department of the Treasury - Internal Revenue Service

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9191 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1a Total ordinary dividends $ | OMB No. 1545-0110 | **Dividends and Distributions** |
| | 1b Qualified dividends $ | 2007 Form **1099-DIV** | |
| | 2a Total capital gain distr. $ | 2b Unrecap. Sec. 1250 gain $ | **Copy A For Internal Revenue Service Center** **File with Form 1096.** |
| PAYER'S federal identification number / RECIPIENT'S identification number | | | |
| RECIPIENT'S name | 2c Section 1202 gain $ | 2d Collectibles (28%) gain $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| | 3 Nondividend distributions $ | 4 Federal income tax withheld $ | |
| Street address (including apt. no.) | | 5 Investment expenses $ | |
| City, state, and ZIP code | 6 Foreign tax paid $ | 7 Foreign country or U.S. possession | |
| Account number (see instructions) / 2nd TIN not. ☐ | 8 Cash liquidation distributions $ | 9 Noncash liquidation distributions $ | |

Form **1099-DIV** Cat. No. 14415N Department of the Treasury - Internal Revenue Service

# Exhibit K

8686 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Unemployment compensation $ (1.40") | OMB No. 1545-0120 2007 | Certain Government Payments |
|---|---|---|---|---|
| | | 2 State or local income tax refunds, credits, or offsets $ | Form 1099-G | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Box 2 amount is for tax year | 4 Federal income tax withheld $ | Copy A (1.10") For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 ATAA payments $ | 6 Taxable grants $ | |
| Street address (including apt. no.) | | 7 Agriculture payments $ | 8 Check if box 2 is trade or business income ▶ ☐ | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-G** Cat. No. 14438M Department of the Treasury - Internal Revenue Service

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8686 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Unemployment compensation $ | OMB No. 1545-0120 2007 | Certain Government Payments |
|---|---|---|---|---|
| | | 2 State or local income tax refunds, credits, or offsets $ | Form 1099-G | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Box 2 amount is for tax year | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 ATAA payments $ | 6 Taxable grants $ | |
| Street address (including apt. no.) | | 7 Agriculture payments $ | 8 Check if box 2 is trade or business income ▶ ☐ | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-G** Cat. No. 14438M Department of the Treasury - Internal Revenue Service

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8686 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Unemployment compensation $ | OMB No. 1545-0120 2007 | Certain Government Payments |
|---|---|---|---|---|
| | | 2 State or local income tax refunds, credits, or offsets $ | Form 1099-G | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Box 2 amount is for tax year | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 ATAA payments $ | 6 Taxable grants $ | |
| Street address (including apt. no.) | | 7 Agriculture payments $ | 8 Check if box 2 is trade or business income ▶ ☐ | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-G** Cat. No. 14438M Department of the Treasury - Internal Revenue Service

# Exhibit L

7171 ☐ VOID ☐ CORRECTED

| ISSUER'S/PROVIDER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Amount of HCTC advance payments $ | OMB No. 1545-1813 2007 Form 1099-H | Health Coverage Tax Credit (HCTC) Advance Payments |
|---|---|---|---|---|
| | | 2 No. of mos. HCTC advance payments received | | |
| ISSUER'S/PROVIDER'S federal identification no. | RECIPIENT'S identification number | 3 Jan. $ | 9 July $ (1.40") | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name (3.40") | | 4 Feb. $ | 10 Aug. $ | |
| | | 5 Mar. $ | 11 Sept. $ | |
| Street address (including apt. no.) | | 6 Apr. $ (1.40") | 12 Oct. $ | |
| City, state, and ZIP code | | 7 May $ | 13 Nov. $ | |
| | | 8 June $ | 14 Dec. $ | |

Form **1099-H** Cat. No. 34912D Department of the Treasury - Internal Revenue Service

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7171 ☐ VOID ☐ CORRECTED

| ISSUER'S/PROVIDER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Amount of HCTC advance payments $ | OMB No. 1545-1813 2007 Form 1099-H | Health Coverage Tax Credit (HCTC) Advance Payments |
|---|---|---|---|---|
| | | 2 No. of mos. HCTC advance payments received | | |
| ISSUER'S/PROVIDER'S federal identification no. | RECIPIENT'S identification number | 3 Jan. $ | 9 July $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 4 Feb. $ | 10 Aug. $ | |
| | | 5 Mar. $ | 11 Sept. $ | |
| Street address (including apt. no.) | | 6 Apr. $ | 12 Oct. $ | |
| City, state, and ZIP code | | 7 May $ | 13 Nov. $ | |
| | | 8 June $ | 14 Dec. $ | |

Form **1099-H** Cat. No. 34912D Department of the Treasury - Internal Revenue Service

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7171 ☐ VOID ☐ CORRECTED

| ISSUER'S/PROVIDER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Amount of HCTC advance payments $ | OMB No. 1545-1813 2007 Form 1099-H | Health Coverage Tax Credit (HCTC) Advance Payments |
|---|---|---|---|---|
| | | 2 No. of mos. HCTC advance payments received | | |
| ISSUER'S/PROVIDER'S federal identification no. | RECIPIENT'S identification number | 3 Jan. $ | 9 July $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 4 Feb. $ | 10 Aug. $ | |
| | | 5 Mar. $ | 11 Sept. $ | |
| Street address (including apt. no.) | | 6 Apr. $ | 12 Oct. $ | |
| City, state, and ZIP code | | 7 May $ | 13 Nov. $ | |
| | | 8 June $ | 14 Dec. $ | |

Form **1099-H** Cat. No. 34912D Department of the Treasury - Internal Revenue Service

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# Exhibit M

9292 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | Payer's RTN (optional) | OMB No. 1545-0112 |
| | | 1 Interest income $ | 2007 Interest Income |
| | | 2 Early withdrawal penalty $ | Form 1099-INT |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Interest on U.S. Savings Bonds and Treas. obligations $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 4 Federal income tax withheld 1.40" $ | 5 Investment expenses $ |
| Street address (including apt. no.) | | 6 Foreign tax paid $ | 7 Foreign country or U.S. possession |
| City, state, and ZIP code | | 8 Tax-exempt interest | 9 Specified private activity bond interest |
| Account number (see instructions) 2.80" | 2nd TIN not. ☐ .60" | $ | $ 4.15" |

Form **1099-INT** Cat. No. 14410K Department of the Treasury - Internal Revenue Service

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9292 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | Payer's RTN (optional) | OMB No. 1545-0112 |
| | | 1 Interest income $ | 2007 Interest Income |
| | | 2 Early withdrawal penalty $ | Form 1099-INT |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Interest on U.S. Savings Bonds and Treas. obligations $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| 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, state, and ZIP code | | 8 Tax-exempt interest | 9 Specified private activity bond interest |
| Account number (see instructions) | 2nd TIN not. ☐ | $ | $ |

Form **1099-INT** Cat. No. 14410K Department of the Treasury - Internal Revenue Service

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9292 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | Payer's RTN (optional) | OMB No. 1545-0112 |
| | | 1 Interest income $ | 2007 Interest Income |
| | | 2 Early withdrawal penalty $ | Form 1099-INT |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Interest on U.S. Savings Bonds and Treas. obligations $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| 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, state, and ZIP code | | 8 Tax-exempt interest | 9 Specified private activity bond interest |
| Account number (see instructions) | 2nd TIN not. ☐ | $ | $ |

Form **1099-INT** Cat. No. 14410K Department of the Treasury - Internal Revenue Service

# Exhibit N

9393 ☐ VOID ☐ CORRECTED 4.50"

| | | | | |
|---|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Gross long-term care benefits paid $ | OMB No. 1545-1519 | Long-Term Care and Accelerated Death Benefits |
| | | 2 Accelerated death benefits paid $ | 2007 Form 1099-LTC | |
| PAYER'S federal identification number | POLICYHOLDER'S identification number | 3 Check one: ☐ Per diem ☐ Reimbursed amount | INSURED'S social security no. 1.40" | Copy A For Internal Revenue Service Center |
| POLICYHOLDER'S name 3.40" | | INSURED'S name | | File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| Street address (including apt. no.) | | Street address (including apt. no.) 2.80" | | |
| City, state, and ZIP code | | City, state, and ZIP code | | |
| Account number (see instructions) | 4 Qualified contract ☐ (optional) | 5 Check, if applicable: (optional) ☐ Chronically ill ☐ Terminally ill | Date certified | |

Form **1099-LTC** Cat. No. 23021Z Department of the Treasury - Internal Revenue Service

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9393 ☐ VOID ☐ CORRECTED

| | | | | |
|---|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Gross long-term care benefits paid $ | OMB No. 1545-1519 | Long-Term Care and Accelerated Death Benefits |
| | | 2 Accelerated death benefits paid $ | 2007 Form 1099-LTC | |
| PAYER'S federal identification number | POLICYHOLDER'S identification number | 3 Check one: ☐ Per diem ☐ Reimbursed amount | INSURED'S social security no. | Copy A For Internal Revenue Service Center |
| POLICYHOLDER'S name | | INSURED'S name | | File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| Street address (including apt. no.) | | Street address (including apt. no.) | | |
| City, state, and ZIP code | | City, state, and ZIP code | | |
| Account number (see instructions) | 4 Qualified contract ☐ (optional) | 5 Check, if applicable: (optional) ☐ Chronically ill ☐ Terminally ill | Date certified | |

Form **1099-LTC** Cat. No. 23021Z Department of the Treasury - Internal Revenue Service

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9393 ☐ VOID ☐ CORRECTED

| | | | | |
|---|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Gross long-term care benefits paid $ | OMB No. 1545-1519 | Long-Term Care and Accelerated Death Benefits |
| | | 2 Accelerated death benefits paid $ | 2007 Form 1099-LTC | |
| PAYER'S federal identification number | POLICYHOLDER'S identification number | 3 Check one: ☐ Per diem ☐ Reimbursed amount | INSURED'S social security no. | Copy A For Internal Revenue Service Center |
| POLICYHOLDER'S name | | INSURED'S name | | File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| Street address (including apt. no.) | | Street address (including apt. no.) | | |
| City, state, and ZIP code | | City, state, and ZIP code | | |
| Account number (see instructions) | 4 Qualified contract ☐ (optional) | 5 Check, if applicable: (optional) ☐ Chronically ill ☐ Terminally ill | Date certified | |

Form **1099-LTC** Cat. No. 23021Z Department of the Treasury - Internal Revenue Service

# Exhibit O

.3125 .50" 5.50" 4.50" 1.40" 3.40" .25"

9595 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1 Rents $ | OMB No. 1545-0115 **2007** Form **1099-MISC** | **Miscellaneous Income** |
| | 2 Royalties $ | | |
| | 3 Other income $ | 4 Federal income tax withheld $ | **Copy A For Internal Revenue Service Center** **File with Form 1096.** |
| PAYER'S federal identification number / RECIPIENT'S identification number | 5 Fishing boat proceeds $ | 6 Medical and health care payments $ | |
| RECIPIENT'S name | 7 Nonemployee compensation $ | 8 Substitute payments in lieu of dividends or interest $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| Street address (including apt. no.) | 9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ► ☐ | 10 Crop insurance proceeds $ | |
| City, state, and ZIP code | 11 | 12 | |
| Account number (see instructions) / 2nd TIN not. ☐ | 13 Excess golden parachute payments $ | 14 Gross proceeds paid to an attorney $ | |
| 15a Section 409A deferrals $ / 15b Section 409A income $ | 16 State tax withheld $ $ | 17 State/Payer's state no. | 18 State income $ $ |

Form **1099-MISC** Cat. No. 14425J Department of the Treasury - Internal Revenue Service

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| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | 1 Rents $ | OMB No. 1545-0115 **2007** Form **1099-MISC** | **Miscellaneous Income** |
| | 2 Royalties $ | | |
| | 3 Other income $ | 4 Federal income tax withheld $ | **Copy A For Internal Revenue Service Center** **File with Form 1096.** |
| PAYER'S federal identification number / RECIPIENT'S identification number | 5 Fishing boat proceeds $ | 6 Medical and health care payments $ | |
| RECIPIENT'S name | 7 Nonemployee compensation $ | 8 Substitute payments in lieu of dividends or interest $ | For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.** |
| Street address (including apt. no.) | 9 Payer made direct sales of $5,000 or more of consumer products to a buyer (recipient) for resale ► ☐ | 10 Crop insurance proceeds $ | |
| City, state, and ZIP code | 11 | 12 | |
| Account number (see instructions) / 2nd TIN not. ☐ | 13 Excess golden parachute payments $ | 14 Gross proceeds paid to an attorney $ | |
| 15a Section 409A deferrals $ / 15b Section 409A income $ | 16 State tax withheld $ $ | 17 State/Payer's state no. | 18 State income $ $ |

Form **1099-MISC** Cat. No. 14425J Department of the Treasury - Internal Revenue Service

# Exhibit P

9696 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Original issue discount for 2007 $ (1.40") | OMB No. 1545-0117 2007 Form 1099-OID | Original Issue Discount |
|---|---|---|---|---|
| | | 2 Other periodic interest $ | | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Early withdrawal penalty $ | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 Description | | |
| Street address (including apt. no.) | | 6 Original issue discount on U.S. Treasury obligations $ | | |
| City, state, and ZIP code | | 7 Investment expenses $ | | |
| Account number (see instructions) (2.80") | 2nd TIN not. ☐ | (4.15") | | |

Form **1099-OID** Cat. No. 14421R Department of the Treasury - Internal Revenue Service

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9696 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Original issue discount for 2007 $ | OMB No. 1545-0117 2007 Form 1099-OID | Original Issue Discount |
|---|---|---|---|---|
| | | 2 Other periodic interest $ | | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Early withdrawal penalty $ | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 Description | | |
| Street address (including apt. no.) | | 6 Original issue discount on U.S. Treasury obligations $ | | |
| City, state, and ZIP code | | 7 Investment expenses $ | | |
| Account number (see instructions) | 2nd TIN not. ☐ | | | |

Form **1099-OID** Cat. No. 14421R Department of the Treasury - Internal Revenue Service

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9696 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Original issue discount for 2007 $ | OMB No. 1545-0117 2007 Form 1099-OID | Original Issue Discount |
|---|---|---|---|---|
| | | 2 Other periodic interest $ | | |
| PAYER'S federal identification number | RECIPIENT'S identification number | 3 Early withdrawal penalty $ | 4 Federal income tax withheld $ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 5 Description | | |
| Street address (including apt. no.) | | 6 Original issue discount on U.S. Treasury obligations $ | | |
| City, state, and ZIP code | | 7 Investment expenses $ | | |
| Account number (see instructions) | 2nd TIN not. ☐ | | | |

Form **1099-OID** Cat. No. 14421R Department of the Treasury - Internal Revenue Service

# Exhibit Q

9797 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Patronage dividends $ (1.40") | OMB No. 1545-0118 |
| | | 2 Nonpatronage distributions $ | 2007 |
| | | 3 Per-unit retain allocations $ | Form 1099-PATR |
| PAYER'S federal identification number | RECIPIENT'S identification number | 4 Federal income tax withheld $ | |
| RECIPIENT'S name | | 5 Redemption of nonqualified notices and retain allocations $ | 6 Domestic production activities deduction $ |
| Street address (including apt. no.) | | | 7 Investment credit $ |
| City, state, and ZIP code | | 8 Work opportunity credit $ | 9 Patron's AMT adjustment $ |
| Account number (see instructions) (2.80") | 2nd TIN not. ☐ | 10 Other credits and deductions $ (4.15") | |

**Taxable Distributions Received From Cooperatives**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-PATR** Cat. No. 14435F Department of the Treasury - Internal Revenue Service

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9797 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Patronage dividends $ | OMB No. 1545-0118 |
| | | 2 Nonpatronage distributions $ | 2007 |
| | | 3 Per-unit retain allocations $ | Form 1099-PATR |
| PAYER'S federal identification number | RECIPIENT'S identification number | 4 Federal income tax withheld $ | |
| RECIPIENT'S name | | 5 Redemption of nonqualified notices and retain allocations $ | 6 Domestic production activities deduction $ |
| Street address (including apt. no.) | | | 7 Investment credit $ |
| City, state, and ZIP code | | 8 Work opportunity credit $ | 9 Patron's AMT adjustment $ |
| Account number (see instructions) | 2nd TIN not. ☐ | 10 Other credits and deductions $ | |

**Taxable Distributions Received From Cooperatives**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-PATR** Cat. No. 14435F Department of the Treasury - Internal Revenue Service

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9797 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S name, street address, city, state, ZIP code, and telephone no. | | 1 Patronage dividends $ | OMB No. 1545-0118 |
| | | 2 Nonpatronage distributions $ | 2007 |
| | | 3 Per-unit retain allocations $ | Form 1099-PATR |
| PAYER'S federal identification number | RECIPIENT'S identification number | 4 Federal income tax withheld $ | |
| RECIPIENT'S name | | 5 Redemption of nonqualified notices and retain allocations $ | 6 Domestic production activities deduction $ |
| Street address (including apt. no.) | | | 7 Investment credit $ |
| City, state, and ZIP code | | 8 Work opportunity credit $ | 9 Patron's AMT adjustment $ |
| Account number (see instructions) | 2nd TIN not. ☐ | 10 Other credits and deductions $ | |

**Taxable Distributions Received From Cooperatives**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **1099-PATR** Cat. No. 14435F Department of the Treasury - Internal Revenue Service

# Exhibit R

4.5"

3131 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S/TRUSTEE'S name, street address, city, state, ZIP code, and telephone number | 1 Gross distribution 1.4" $ | OMB No. 1545-1760 | Payments From Qualified Education Programs (Under Sections 529 and 530) |
| 2.83" 3.4" | 2 Earnings $ | 2007 Form 1099-Q | |
| PAYER'S/TRUSTEE'S federal identification no. / RECIPIENT'S social security number | 3 Basis $ | 4 Trustee-to-trustee transfer 1.4" ☐ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | 5 Check one: • Qualified tuition program— Private ☐ or State ☐ • Coverdell ESA ☐ | 6 Check if the recipient is not the designated beneficiary ☐ 3.25" | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **1099-Q** Cat. No. 32223J Department of the Treasury - Internal Revenue Service

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3131 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S/TRUSTEE'S name, street address, city, state, ZIP code, and telephone number | 1 Gross distribution $ | OMB No. 1545-1760 | Payments From Qualified Education Programs (Under Sections 529 and 530) |
| | 2 Earnings $ | 2007 Form 1099-Q | |
| PAYER'S/TRUSTEE'S federal identification no. / RECIPIENT'S social security number | 3 Basis $ | 4 Trustee-to-trustee transfer ☐ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | 5 Check one: • Qualified tuition program— Private ☐ or State ☐ • Coverdell ESA ☐ | 6 Check if the recipient is not the designated beneficiary ☐ | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **1099-Q** Cat. No. 32223J Department of the Treasury - Internal Revenue Service

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3131 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| PAYER'S/TRUSTEE'S name, street address, city, state, ZIP code, and telephone number | 1 Gross distribution $ | OMB No. 1545-1760 | Payments From Qualified Education Programs (Under Sections 529 and 530) |
| | 2 Earnings $ | 2007 Form 1099-Q | |
| PAYER'S/TRUSTEE'S federal identification no. / RECIPIENT'S social security number | 3 Basis $ | 4 Trustee-to-trustee transfer ☐ | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | 5 Check one: • Qualified tuition program— Private ☐ or State ☐ • Coverdell ESA ☐ | 6 Check if the recipient is not the designated beneficiary ☐ | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **1099-Q** Cat. No. 32223J Department of the Treasury - Internal Revenue Service

# Exhibit S

9898 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, and ZIP code | 1 Gross distribution $ | OMB No. 1545-0119 2007 Form 1099-R | Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. |
|---|---|---|---|
| | 2a Taxable amount $ | | |
| | 2b Taxable amount not determined ☐ | Total distribution ☐ | Copy A For Internal Revenue Service Center |
| PAYER'S federal identification number / RECIPIENT'S identification number | 3 Capital gain (included in box 2a) $ | 4 Federal income tax withheld $ | File with Form 1096. |
| RECIPIENT'S name | 5 Employee contributions /Designated Roth contributions or insurance premiums $ | 6 Net unrealized appreciation in employer's securities $ | For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| Street address (including apt. no.) | 7 Distribution code(s) IRA/SEP/SIMPLE ☐ | 8 Other $ % | |
| City, state, and ZIP code | 9a Your percentage of total distribution % | 9b Total employee contributions $ | |
| 1st year of desig. Roth contrib. | 10 State tax withheld $ $ | 11 State/Payer's state no. | 12 State distribution $ $ |
| Account number (see instructions) | 13 Local tax withheld $ $ | 14 Name of locality | 15 Local distribution $ $ |

Form **1099-R** Cat. No. 14436Q Department of the Treasury — Internal Revenue Service

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9898 ☐ VOID ☐ CORRECTED

| PAYER'S name, street address, city, state, and ZIP code | 1 Gross distribution $ | OMB No. 1545-0119 2007 Form 1099-R | Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs, Insurance Contracts, etc. |
|---|---|---|---|
| | 2a Taxable amount $ | | |
| | 2b Taxable amount not determined ☐ | Total distribution ☐ | Copy A For Internal Revenue Service Center |
| PAYER'S federal identification number / RECIPIENT'S identification number | 3 Capital gain (included in box 2a) $ | 4 Federal income tax withheld $ | File with Form 1096. |
| RECIPIENT'S name | 5 Employee contributions /Designated Roth contributions or insurance premiums $ | 6 Net unrealized appreciation in employer's securities $ | For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| Street address (including apt. no.) | 7 Distribution code(s) IRA/SEP/SIMPLE ☐ | 8 Other $ % | |
| City, state, and ZIP code | 9a Your percentage of total distribution % | 9b Total employee contributions $ | |
| 1st year of desig. Roth contrib. | 10 State tax withheld $ $ | 11 State/Payer's state no. | 12 State distribution $ $ |
| Account number (see instructions) | 13 Local tax withheld $ $ | 14 Name of locality | 15 Local distribution $ $ |

Form **1099-R** Cat. No. 14436Q Department of the Treasury — Internal Revenue Service

# Exhibit T

7575 ☐ VOID ☐ CORRECTED

| FILER'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of closing (1.40") | OMB No. 1545-0997 | |
|---|---|---|---|
| | 2 Gross proceeds $ | 2007 Form 1099-S | Proceeds From Real Estate Transactions |
| FILER'S federal identification number (1.70") / TRANSFEROR'S identification number (1.70") | 3 Address or legal description (including city, state, and ZIP code) (2.80") | | Copy A (1.10") For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| TRANSFEROR'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | 4 Check here if the transferor received or will receive property or services as part of the consideration. ► ☐ | | |
| Account or escrow number (see instructions) | 5 Buyer's part of real estate tax $ | | |

Form **1099-S** Cat. No. 64292E Department of the Treasury - Internal Revenue Service

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7575 ☐ VOID ☐ CORRECTED

| FILER'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of closing | OMB No. 1545-0997 | |
|---|---|---|---|
| | 2 Gross proceeds $ | 2007 Form 1099-S | Proceeds From Real Estate Transactions |
| FILER'S federal identification number / TRANSFEROR'S identification number | 3 Address or legal description (including city, state, and ZIP code) | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| TRANSFEROR'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | 4 Check here if the transferor received or will receive property or services as part of the consideration. ► ☐ | | |
| Account or escrow number (see instructions) | 5 Buyer's part of real estate tax $ | | |

Form **1099-S** Cat. No. 64292E Department of the Treasury - Internal Revenue Service

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7575 ☐ VOID ☐ CORRECTED

| FILER'S name, street address, city, state, ZIP code, and telephone no. | 1 Date of closing | OMB No. 1545-0997 | |
|---|---|---|---|
| | 2 Gross proceeds $ | 2007 Form 1099-S | Proceeds From Real Estate Transactions |
| FILER'S federal identification number / TRANSFEROR'S identification number | 3 Address or legal description (including city, state, and ZIP code) | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| TRANSFEROR'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | 4 Check here if the transferor received or will receive property or services as part of the consideration. ► ☐ | | |
| Account or escrow number (see instructions) | 5 Buyer's part of real estate tax $ | | |

Form **1099-S** Cat. No. 64292E Department of the Treasury - Internal Revenue Service

# Exhibit U

9494 ☐ VOID ☐ CORRECTED

| TRUSTEE'S/PAYER'S name, street address, city, state, and ZIP code | | | OMB No. 1545-1517<br>2007<br>Form 1099-SA | Distributions From an HSA, Archer MSA, or Medicare Advantage MSA |
|---|---|---|---|---|
| PAYER'S federal identification number | RECIPIENT'S identification number | 1 Gross distribution<br>$ | 2 Earnings on excess cont.<br>$ | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 3 Distribution code | 4 FMV on date of death<br>$ | |
| Street address (including apt. no.) | | 5 HSA ☐<br>Archer MSA ☐<br>MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-SA** Cat. No. 38471D Department of the Treasury - Internal Revenue Service

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9494 ☐ VOID ☐ CORRECTED

| TRUSTEE'S/PAYER'S name, street address, city, state, and ZIP code | | | OMB No. 1545-1517<br>2007<br>Form 1099-SA | Distributions From an HSA, Archer MSA, or Medicare Advantage MSA |
|---|---|---|---|---|
| PAYER'S federal identification number | RECIPIENT'S identification number | 1 Gross distribution<br>$ | 2 Earnings on excess cont.<br>$ | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 3 Distribution code | 4 FMV on date of death<br>$ | |
| Street address (including apt. no.) | | 5 HSA ☐<br>Archer MSA ☐<br>MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-SA** Cat. No. 38471D Department of the Treasury - Internal Revenue Service

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9494 ☐ VOID ☐ CORRECTED

| TRUSTEE'S/PAYER'S name, street address, city, state, and ZIP code | | | OMB No. 1545-1517<br>2007<br>Form 1099-SA | Distributions From an HSA, Archer MSA, or Medicare Advantage MSA |
|---|---|---|---|---|
| PAYER'S federal identification number | RECIPIENT'S identification number | 1 Gross distribution<br>$ | 2 Earnings on excess cont.<br>$ | Copy A<br>For Internal Revenue Service Center<br>File with Form 1096.<br>For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| RECIPIENT'S name | | 3 Distribution code | 4 FMV on date of death<br>$ | |
| Street address (including apt. no.) | | 5 HSA ☐<br>Archer MSA ☐<br>MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **1099-SA** Cat. No. 38471D Department of the Treasury - Internal Revenue Service

# Exhibit V

2828 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | | 1 IRA contributions (other than amounts in boxes 2–4 and 8–10) $ | OMB No. 1545-0747 |
| | | 2 Rollover contributions 1.40" $ | 2007 Form 5498 |
| TRUSTEE'S or ISSUER'S federal identification no. | PARTICIPANT'S social security number | 3 Roth IRA conversion amount $ | 4 Recharacterized contributions $ |
| PARTICIPANT'S name | | 5 Fair market value of account $ | 6 Life insurance cost included in box 1 $ |
| Street address (including apt. no.) | | 7 IRA ☐ SEP ☐ | SIMPLE ☐ Roth IRA ☐ |
| City, state, and ZIP code | | 8 SEP contributions $ 1.40" | 9 SIMPLE contributions $ 1.40" |
| Account number (see instructions) | | 10 Roth IRA contributions $ | 11 Check if RMD for 2008 ☐ |

**IRA Contribution Information**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **5498** Cat. No. 50010C Department of the Treasury - Internal Revenue Service

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2828 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | | 1 IRA contributions (other than amounts in boxes 2–4 and 8–10) $ | OMB No. 1545-0747 |
| | | 2 Rollover contributions $ | 2007 Form 5498 |
| TRUSTEE'S or ISSUER'S federal identification no. | PARTICIPANT'S social security number | 3 Roth IRA conversion amount $ | 4 Recharacterized contributions $ |
| PARTICIPANT'S name | | 5 Fair market value of account $ | 6 Life insurance cost included in box 1 $ |
| Street address (including apt. no.) | | 7 IRA ☐ SEP ☐ | SIMPLE ☐ Roth IRA ☐ |
| City, state, and ZIP code | | 8 SEP contributions $ | 9 SIMPLE contributions $ |
| Account number (see instructions) | | 10 Roth IRA contributions $ | 11 Check if RMD for 2008 ☐ |

**IRA Contribution Information**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **5498** Cat. No. 50010C Department of the Treasury - Internal Revenue Service

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2828 ☐ VOID ☐ CORRECTED

| | | | |
|---|---|---|---|
| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | | 1 IRA contributions (other than amounts in boxes 2–4 and 8–10) $ | OMB No. 1545-0747 |
| | | 2 Rollover contributions $ | 2007 Form 5498 |
| TRUSTEE'S or ISSUER'S federal identification no. | PARTICIPANT'S social security number | 3 Roth IRA conversion amount $ | 4 Recharacterized contributions $ |
| PARTICIPANT'S name | | 5 Fair market value of account $ | 6 Life insurance cost included in box 1 $ |
| Street address (including apt. no.) | | 7 IRA ☐ SEP ☐ | SIMPLE ☐ Roth IRA ☐ |
| City, state, and ZIP code | | 8 SEP contributions $ | 9 SIMPLE contributions $ |
| Account number (see instructions) | | 10 Roth IRA contributions $ | 11 Check if RMD for 2008 ☐ |

**IRA Contribution Information**

**Copy A For Internal Revenue Service Center File with Form 1096.** For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

Form **5498** Cat. No. 50010C Department of the Treasury - Internal Revenue Service

# Exhibit W

7272 ☐ VOID ☐ CORRECTED

| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | 1 Coverdell ESA contributions $ | OMB No. 1545-1815 | Coverdell ESA Contribution Information |
|---|---|---|---|
| 3.40" | 2 Rollover contributions $ | 2007 Form 5498-ESA | |
| TRUSTEE'S/ISSUER'S federal identification no. / BENEFICIARY'S social security number | | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BENEFICIARY'S name | | 1.40" | |
| Street address (including apt. no.) | | | |
| .45" City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **5498-ESA** Cat. No. 34011J Department of the Treasury - Internal Revenue Service

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7272 ☐ VOID ☐ CORRECTED

| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | 1 Coverdell ESA contributions $ | OMB No. 1545-1815 | Coverdell ESA Contribution Information |
|---|---|---|---|
| | 2 Rollover contributions $ | 2007 Form 5498-ESA | |
| TRUSTEE'S/ISSUER'S federal identification no. / BENEFICIARY'S social security number | | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BENEFICIARY'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **5498-ESA** Cat. No. 34011J Department of the Treasury - Internal Revenue Service

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7272 ☐ VOID ☐ CORRECTED

| TRUSTEE'S or ISSUER'S name, street address, city, state, and ZIP code | 1 Coverdell ESA contributions $ | OMB No. 1545-1815 | Coverdell ESA Contribution Information |
|---|---|---|---|
| | 2 Rollover contributions $ | 2007 Form 5498-ESA | |
| TRUSTEE'S/ISSUER'S federal identification no. / BENEFICIARY'S social security number | | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| BENEFICIARY'S name | | | |
| Street address (including apt. no.) | | | |
| City, state, and ZIP code | | | |
| Account number (see instructions) | | | |

Form **5498-ESA** Cat. No. 34011J Department of the Treasury - Internal Revenue Service

# Exhibit X

2727 ☐ VOID ☐ CORRECTED

| TRUSTEE'S name, street address, city, state, and ZIP code | | 1 Employee or self-employed person's Archer MSA contributions made in 2007 and 2008 for 2007 $ | OMB No. 1545-1518 | HSA, Archer MSA, or Medicare Advantage MSA Information |
|---|---|---|---|---|
| | | 2 Total contributions made in 2007 $ | 2007 Form 5498-SA | |
| TRUSTEE'S federal identification number | PARTICIPANT'S social security number | 3 Total HSA or Archer MSA contributions made in 2008 for 2007 $ | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PARTICIPANT'S name | | 4 Rollover contributions $ | 5 Fair market value of HSA, Archer MSA, or MA MSA $ | |
| Street address (including apt. no.) | | 6 HSA ☐ Archer MSA ☐ MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **5498-SA** Cat. No. 38467V Department of the Treasury - Internal Revenue Service

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2727 ☐ VOID ☐ CORRECTED

| TRUSTEE'S name, street address, city, state, and ZIP code | | 1 Employee or self-employed person's Archer MSA contributions made in 2007 and 2008 for 2007 $ | OMB No. 1545-1518 | HSA, Archer MSA, or Medicare Advantage MSA Information |
|---|---|---|---|---|
| | | 2 Total contributions made in 2007 $ | 2007 Form 5498-SA | |
| TRUSTEE'S federal identification number | PARTICIPANT'S social security number | 3 Total HSA or Archer MSA contributions made in 2008 for 2007 $ | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PARTICIPANT'S name | | 4 Rollover contributions $ | 5 Fair market value of HSA, Archer MSA, or MA MSA $ | |
| Street address (including apt. no.) | | 6 HSA ☐ Archer MSA ☐ MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **5498-SA** Cat. No. 38467V Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

2727 ☐ VOID ☐ CORRECTED

| TRUSTEE'S name, street address, city, state, and ZIP code | | 1 Employee or self-employed person's Archer MSA contributions made in 2007 and 2008 for 2007 $ | OMB No. 1545-1518 | HSA, Archer MSA, or Medicare Advantage MSA Information |
|---|---|---|---|---|
| | | 2 Total contributions made in 2007 $ | 2007 Form 5498-SA | |
| TRUSTEE'S federal identification number | PARTICIPANT'S social security number | 3 Total HSA or Archer MSA contributions made in 2008 for 2007 $ | | Copy A For Internal Revenue Service Center File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2007 General Instructions for Forms 1099, 1098, 5498, and W-2G. |
| PARTICIPANT'S name | | 4 Rollover contributions $ | 5 Fair market value of HSA, Archer MSA, or MA MSA $ | |
| Street address (including apt. no.) | | 6 HSA ☐ Archer MSA ☐ MA MSA ☐ | | |
| City, state, and ZIP code | | | | |
| Account number (see instructions) | | | | |

Form **5498-SA** Cat. No. 38467V Department of the Treasury - Internal Revenue Service

# Exhibit Y

3232 ☐ CORRECTED

| | | |
|---|---|---|
| PAYER'S name | 1 Gross winnings | 2 Federal income tax withheld |
| Street address | 3 Type of wager | 4 Date won |
| City, state, and ZIP code | 5 Transaction | 6 Race |
| Federal identification number / Telephone number | 7 Winnings from identical wagers | 8 Cashier |
| WINNER'S name | 9 Winner's taxpayer identification no. | 10 Window |
| Street address (including apt. no.) | 11 First I.D. | 12 Second I.D. |
| City, state, and ZIP code | 13 State/Payer's state identification no. | 14 State income tax withheld |

1.45" 1.45" 3.00" 2.85" 1.40"

OMB No. 1545-0238

**2007**

**Form W-2G**

**Certain Gambling Winnings**

For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

**File with Form 1096.**

Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

**Signature ►** **Date ►**

**Copy A For Internal Revenue Service Center**

Form **W-2G** Cat. No. 10138V Department of the Treasury - Internal Revenue Service

3232 ☐ CORRECTED

| | | |
|---|---|---|
| PAYER'S name | 1 Gross winnings | 2 Federal income tax withheld |
| Street address | 3 Type of wager | 4 Date won |
| City, state, and ZIP code | 5 Transaction | 6 Race |
| Federal identification number / Telephone number | 7 Winnings from identical wagers | 8 Cashier |
| WINNER'S name | 9 Winner's taxpayer identification no. | 10 Window |
| Street address (including apt. no.) | 11 First I.D. | 12 Second I.D. |
| City, state, and ZIP code | 13 State/Payer's state identification no. | 14 State income tax withheld |

OMB No. 1545-0238

**2007**

**Form W-2G**

**Certain Gambling Winnings**

For Privacy Act and Paperwork Reduction Act Notice, see the **2007 General Instructions for Forms 1099, 1098, 5498, and W-2G.**

**File with Form 1096.**

Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

**Signature ►** **Date ►**

**Copy A For Internal Revenue Service Center**

Form **W-2G** Cat. No. 10138V Department of the Treasury - Internal Revenue Service

3232 ☐ CORRECTED

| | | |
|---|---|---|
| PAYER'S name | 1 Gross winnings | 2 Federal income tax withheld |
| Street address | 3 Type of wager | 4 Date won |
| City, state, and ZIP code | 5 Transaction | 6 Race |
| Federal identification number / Telephone number | 7 Winnings from identical wagers | 8 Cashier |
| WINNER'S name | 9 Winner's taxpayer identification no. | 10 Window |
| Street address (including apt. no.) | 11 First I.D. | 12 Second I.D. |
| City, state, and ZIP code | 13 State/Payer's state identification no. | 14 State income tax withheld |

OMB No. 1545-0238

**2007**

**Form W-2G**

**Certain Gambling Winnings**

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Under penalties of perjury, I declare that, to the best of my knowledge and belief, the name, address, and taxpayer identification number that I have furnished correctly identify me as the recipient of this payment and any payments from identical wagers, and that no other person is entitled to any part of these payments.

**Signature ►** **Date ►**

**Copy A For Internal Revenue Service Center**

Form **W-2G** Cat. No. 10138V Department of the Treasury - Internal Revenue Service

# Exhibit Z

Form **1042-S** Department of the Treasury Internal Revenue Service

**Foreign Person's U.S. Source Income Subject to Withholding** **2007**

☐ **AMENDED** ☐ **PRO-RATA BASIS REPORTING**

OMB No. 1545-0096

**Copy A** for Internal Revenue Service

5.50"

| 1 Income code | 2 Gross income | 3 Withholding allowances | 4 Net income | 5 Tax rate | 6 Exemption code | 7 U.S. Federal tax withheld | 8 Amount repaid to recipient |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

| | |
|---|---|
| 9 Withholding agent's EIN ► ☐ EIN ☐ QI-EIN | 14 Recipient's U.S. TIN, if any ► ☐ SSN or ITIN ☐ EIN ☐ QI-EIN |
| 10a WITHHOLDING AGENT'S name | 15 Recipient's country of residence for tax purposes / 16 Country code |
| 10b Address (number and street) | 17 NONQUALIFIED INTERMEDIARY'S (NQI's)/ FLOW-THROUGH ENTITY'S name / 18 Country code |
| 10c Additional address line (room or suite no.) | 19a NQI's/Flow-through entity's address (number and street) |
| 10d City or town, province or state, and country / 10e ZIP code or foreign postal code | 19b Additional address line (room or suite no.) |
| 11 Recipient's account number (optional) / 12 Recipient code | 19c City or town, province or state, and country / 19d ZIP code or foreign postal code |
| 13a RECIPIENT'S name | 20 NQI's/Flow-through entity's TIN, if any ► |
| 13b Address (number and street) | 21 PAYER'S name and TIN (if different from withholding agent's) |
| 13c Additional address line (room or suite no.) | |
| 13d City or town, province or state, and country / 13e ZIP code or foreign postal code | 22 State income tax withheld / 23 Payer's state tax no. / 24 Name of state |

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**For Privacy Act and Paperwork Reduction Act Notice, see page 16 of the separate instructions.** Cat. No. 11386R Form **1042-S** (2007)

8.00"


Form **1042-S** Department of the Treasury Internal Revenue Service

**Foreign Person's U.S. Source Income Subject to Withholding** **2007**

☐ **AMENDED** ☐ **PRO-RATA BASIS REPORTING**

OMB No. 1545-0096

**Copy A** for Internal Revenue Service

| 1 Income code | 2 Gross income | 3 Withholding allowances | 4 Net income | 5 Tax rate | 6 Exemption code | 7 U.S. Federal tax withheld | 8 Amount repaid to recipient |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

| | |
|---|---|
| 9 Withholding agent's EIN ► ☐ EIN ☐ QI-EIN | 14 Recipient's U.S. TIN, if any ► ☐ SSN or ITIN ☐ EIN ☐ QI-EIN |
| 10a WITHHOLDING AGENT'S name | 15 Recipient's country of residence for tax purposes / 16 Country code |
| 10b Address (number and street) | 17 NONQUALIFIED INTERMEDIARY'S (NQI's)/ FLOW-THROUGH ENTITY'S name / 18 Country code |
| 10c Additional address line (room or suite no.) | 19a NQI's/Flow-through entity's address (number and street) |
| 10d City or town, province or state, and country / 10e ZIP code or foreign postal code | 19b Additional address line (room or suite no.) |
| 11 Recipient's account number (optional) / 12 Recipient code | 19c City or town, province or state, and country / 19d ZIP code or foreign postal code |
| 13a RECIPIENT'S name | 20 NQI's/Flow-through entity's TIN, if any ► |
| 13b Address (number and street) | 21 PAYER'S name and TIN (if different from withholding agent's) |
| 13c Additional address line (room or suite no.) | |
| 13d City or town, province or state, and country / 13e ZIP code or foreign postal code | 22 State income tax withheld / 23 Payer's state tax no. / 24 Name of state |

**For Privacy Act and Paperwork Reduction Act Notice, see page 16 of the separate instructions.** Cat. No. 11386R Form **1042-S** (2007)