

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		Payer's RTN (optional)		OMB No. 1545-0112	
		1 Interest income \$		Form 1099-INT (Rev. January 2024)	
				For calendar year _____	
PAYER'S TIN		RECIPIENT'S TIN		2 Early withdrawal penalty \$	
				3 Interest on U.S. Savings Bonds and Treasury obligations \$	
RECIPIENT'S name		4 Federal income tax withheld \$		5 Investment expenses \$	
		6 Foreign tax paid \$		7 Foreign country or U.S. territory	
Street address (including apt. no.)		8 Tax-exempt interest \$		9 Specified private activity bond interest \$	
		10 Market discount \$		11 Bond premium \$	
City or town, state or province, country, and ZIP or foreign postal code		FATCA filing requirement <input type="checkbox"/>		12 Bond premium on Treasury obligations \$	
		13 Bond premium on tax-exempt bond \$			
Account number (see instructions)		2nd TIN not. <input type="checkbox"/>	14 Tax-exempt and tax credit bond CUSIP no.	15 State	16 State identification no.
					17 State tax withheld \$

Interest
Income

Copy A

For
Internal Revenue
Service Center

File with Form 1096.

For Privacy Act
and Paperwork
Reduction Act
Notice, see the
current **General
Instructions for
Certain
Information
Returns.**