7979 UVOID CORRE	CTED		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. FIRST MIDDLE LAST 1234 YOUR GENERAL DELIVERY	Applicable checkbox on Form 8949	OMB No. 1545-0715 2023 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions
ADDRESS ST. Or 1234 POST OFFICE ADDRESS	1a Description of property (Exa VOLUNTARY CONVEYA	CONTROL MANAGEMENT OF THE REAL PROPERTY OF THE PARTY OF T	INSTRUMENT
CITY / TOWN, ST 12345 (123) 456-7890	1b Date acquired DATE YOU RECEIVED TO	Date sold or disposed DATE SENT BANK / CORP.	
PAYER'S TIN RECIPIENT'S TIN	- 1 To 1 T	Cost or other basis	Copy A
SSN-XX-XXXX (LEAVE BLANK)	\$ AMOUNT* \$ If Accrued market discount \$ -0- \$	-0- Wash sale loss disallowed -0-	For Internal Revenue
RECIPIENT'S name	2 Short-term gain or loss 3	Check if proceeds from:	Service Center
BANK / CORP. NAME HERE		Collectibles QOF	File with Form 1096.
Street address (including apt. no.) 1234 THEIR ADDRESS ST.	\$ AMOUNT*	Check if noncovered security Check if loss is not allowed	FOR BROKERS ONLY. For Privacy Act
City or town, state or province, country, and ZIP or foreign postal code CITY / TOWN, ST 12345	Gross proceeds X	based on amount in 1d W Unrealized profit or (loss) on	and Paperwork Reduction Act Notice, see the
Account number (see instructions) ACCOUNT NUMBER		open contracts—12/31/2022	2023 General Instructions for Certain
(LEAVE BLANK) FATCA filing requirement	open contracts—12/31/2023	Aggregate profit or (loss) on contracts	Information Returns.
14 State name (LEAVE BLANK) \$ -0-	\$ (L E A V E \$ E	Bartering	
Form 1099-B Cat. No. 14411V	www.irs.gov/Form1099B D	epartment of the Treasury -	Internal Revenue Service

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

THIS TEMPLATE IS DESIGNED FOR THE A4V PROCESS.

TO REPORT CAPITAL GAINS RELATED TO STOCK SALES AND OTHER ASSETS,

REFER TO THE I.R.S. INSTRUCTION MANUAL FOR THIS FORM.

* THE AMOUNT SHOULD BE THE TOTAL AMOUNT
PAID TO THE BANK WITH YOUR INSTRUMENT
(EITHER A4V, PROMISSORY NOTE, OR BILL OF EXCHANGE).

** RECIPIENT'S T.I.N. (TAXPAYER IDENTIFICATION NUMBER) / E.I.N.

CAN BE FOUND BY A RECORDS SEARCH ON SEC.GOV OR WITH

THE SECRETARY OF STATE.

Requires a form 1096 AND this form.

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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. FIRST MIDDLE LAST 1234 YOUR GENERAL DELIVERY	Applicable checkbox on Form 8949	OMB No. 1545-0715 2023 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions
ADDRESS ST. 1234 POST OFFICE ADDRESS	1a Description of property (Exam VOLUNTARY CONVEYAN	[1] [1] [1] [2] [2] [2] [2] [2] [2] [2] [2] [2] [2	INSTRUMENT
CITY / TOWN, ST 12345 (123) 456-7890	1b Date acquired DATE YOU RECEIVED TO	ate sold or disposed DATE SENT BANK / CORP.	2000 J Se
PAYER'S TIN RECIPIENT'S TIN SSN-XX-XXXX (LEAVE BLANK)	\$ AMOUNT* \$	ost or other basis - 0 - /ash sale loss disallowed - 0 -	Copy 1 For State Tax Department
BANK / CORP. NAME HERE	2 Short-term gain or loss 3 If Long-term gain or loss C	checked, proceeds from:	
Street address (including apt. no.) 1234 THEIR ADDRESS ST.	\$ AMOUNT* se	checked, noncovered curity	FOR BROKERS
City or town, state or province, country, and ZIP or foreign postal code CITY / TOWN, ST 12345	Gross proceeds Net proceeds 8 Profit or (loss) realized in 9 Ur	sed on amount in 1d X nrealized profit or (loss) on	
Account number (see instructions) ACCOUNT NUMBER	78	en contracts-12/31/2022 LANK)	
CUSIP number (LEAVE BLANK) FATCA filing requirement	open contracts—12/31/2023 oi	ggregate profit or (loss) n contracts LANK)	
14 State name (LEAVE BLANK) \$ -0-	\$, \$_	artering -0-	
Form 1099-B	www.irs.gov/Form1099B De	partment of the Treasury -	Internal Revenue Service

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CORRECTED	(if checked)
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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			Applicable checkbox on Form 8	(LECTION CO. 1)	Proceeds From Broker and	
FIRST		(0.000 to 10.000	LAST	C	2023	Barter Exchange Transactions
1234 YOUR		NERAL D	ELIVERY		Form 1099-B	Transactions
ADDRESS ST.			FICE ADDRESS	1a Description of property (I VOLUNTARY CONVE	Example: 100 sh. XYZ Co.) EYANCE OF ISSUEI) INSTRUMENT
CITY / (12	TOWN, 23) 456	ST 5-7890	12345 D	1b Date acquired DATE YOU RECEIVED	1c Date sold or disposed DATE SENT TO BANK / CORP.	
PAYER'S TIN		RECIPIENT'S			1e Cost or other basis \$ -0-	Copy B For Recipient
SSN-XX-X	XXXX (LEAVE	BLANK)		1g Wash sale loss disallowed \$ -0-	organises a final angulade entre and in € metros causes at the co.
RECIPIENT'S name				2 Short-term gain or loss	3 If checked, proceeds from:	
BANK /	CORP.	NAME	HERE	Long-term gain or loss Ordinary	Collectibles QOF	This is important tax
Street address (including		DDRES	SS ST.	4 Federal income tax withheld \$ AMOUNT*	5 If checked, noncovered security	finormation and SER: Oping furnished to the IRS. If you are
City or town, state or pro	THE CONTROL STATE	29) (C. A. P.	STREET, STREET, SO	6 Reported to IRS: Gross proceeds	7 If checked, loss is not allowed based on amount in 1d	required to file a return, a negligence
CITY /	TOWN,	ST	12345	Net proceeds 8 Profit or (loss) realized in	9 Unrealized profit or (loss) on	penalty or other sanction may be
Account number (see ins		NUMBE	SR.	\$ (L E A V E	open contracts—12/31/2022 \$ B L A N K)	imposed on you if this income is taxable and the IRS
CUSIP number (LEAVE	BLANI	K)	FATCA filing requirement	open contracts-12/31/2023	11 Aggregate profit or (loss) on contracts	determines that it has not been
14 State name (LEAVE	15 State identifica BLAN	Contract of the Contract of th	State tax withheld		\$ B L A N K)	reported.
		\$		- to IRS	\$ -0-	29
Form 1099-B		(Keep for	your records)	www.irs.gov/Form1099B	Department of the Treasury -	Internal Revenue Service

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	CONTROLLO	(II CHECKEU)

PAYER'S name, street address, city or town, state or province, country, ZIF or foreign postal code, and telephone no. FIRST MIDDLE LAST 1234 YOUR GENERAL DELIVERY	Applicable checkbox on Form 8949	OMB No. 1545-0715 20 23 Form 1099-B	Proceeds From Broker and Barter Exchange Transactions
ADDRESS ST. Or 1234 POST OFFICE ADDRESS CITY / TOWN, ST 12345 (123) 456-7890 PAYER'S TIN RECIPIENT'S TIN	VOLUNTARY CONVEYA 1b Date acquired DATE YOU RECEIVED TO 1d Proceeds 1e	mple: 100 sh. XYZ Co.) NCE OF ISSUE: Date sold or disposed DATE SENT BANK / CORP. Cost or other basis	
SSN-XX-XXXX (LEAVE BLANK	\$ AMOUNT* \$ 1f Accrued market discount 1g \$ -0- \$	-0- Wash sale loss disallowed -0-	To be filed with recipient's state income tax return,
BANK / CORP. NAME HERE	Long-term gain or loss	checked, proceeds from: Collectibles	when required.
Street address (including apt. no.) 1234 THEIR ADDRESS ST.	\$ AMOUNT* 5 6 Reported to IRS: 7 If	checked, noncovered ecurity Checked, loss is not allowed	FOR BROKERS ONLY.
City or town, state or province, country, and ZIP or foreign postal code CITY / TOWN, ST 12345	Reference Refere	Inrealized profit or (loss) on upon contracts—12/31/2022	
Account number (see instructions) ACCOUNT NUMBER		BLANK)	
CUSIP number (LEAVE BLANK) FATCA filing requirement	open contracts—12/31/2023	Aggregate profit or (loss) on contracts	
14 State name (LEAVE BLANK) \$ -0-		B L A N K) Bartering -0-	
Form 1099-B	www.irs.gov/Form1099B D	epartment of the Treasury	- Internal Revenue Service

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