		CORRE	CTED (if checked)				
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			Payer's RTN (optional)	OM	1B No. 1545-0112		
				20 <b>20</b>	Interest		
			1 Interest income		Income		
			\$	Fo	rm <b>1099-INT</b>		
			2 Early withdrawal penalty			Copy 2	
PAYER'S TIN RECIPIENT'S TIN			\$				
			3 Interest on U.S. Savings Bonds and Treas. obligations				
			\$				
RECIPIENT'S name			4 Federal income tax withheld 5 Investment expenses			1	
			\$	\$			
Street address (including apt. no.)			6 Foreign tax paid	<b>7</b> Foreigr	country or U.S. possession		
			\$	Specified private activity bond interest		recipient's state income tax return, when required.	
			8 Tax-exempt interest				
City or town, state or province, country, and ZIP or foreign postal code  FATCA filling requirement			\$	\$	req		
			10 Market discount	11 Bond premium			
				_			
			T	\$ 13 Bond premium on tax-exempt bond \$		_	
	, , ,						
Account number (see instructions)			14 Tax-exempt and tax credit	_	16 State identification no.	17 State tax withheld	
			bond CUSIP no.			<b> </b> \$	
						\$	
Form <b>1099-INT</b>			www.irs.gov/Form1099INT	Depa	rtment of the Treasury -	- Internal Revenue Service	

			1 Interest income	2020	Income		
			\$	Form 1099-INT			
			2 Early withdrawal penalty		Copy 2		
PAYER'S TIN RECIPIENT'S TIN			\$				
			3 Interest on U.S. Savings Bo				
			\$				
RECIPIENT'S name			4 Federal income tax withheld				
			\$	\$			
			6 Foreign tax paid	7 Foreign country or U.S. possession	recipient's state		
Street address (including apt. no.)			\$				
			8 Tax-exempt interest	Specified private activity bond interest			
City or town, state or province, country, and ZIP or foreign postal code			\$	\$			
			10 Market discount	11 Bond premium			
		FATCA filing requirement	\$	\$			
r			12 Bond premium on Treasury obligations	13 Bond premium on tax-exempt bond	ond		

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP Payer's RTN (optional) or foreign postal code, and telephone no.

Account number (see instructions)

14 Tax-exempt and tax credit bond CUSIP no.

17 State tax withheld

**15** State **16** State identification no.

OMB No. 1545-0112