

☐ CORRECTED (if checked)

FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		FILER'S TIN	OMB No. 1545-2205  <b>2020</b>  Form <b>1099-K</b>	<b>Payment Card and Third Party Network Transactions</b>	
		PAYEE'S TIN			
		1a Gross amount of payment card/third party network transactions \$			
		1b Card Not Present transactions \$			
Check to indicate if FILER is a (an): Payment settlement entity (PSE) <input type="checkbox"/> Electronic Payment Facilitator (EPF)/Other third party <input type="checkbox"/>		Check to indicate transactions reported are: Payment card <input type="checkbox"/> Third party network <input type="checkbox"/>		2 Merchant category code	<b>Copy B For Payee</b>  This is important tax information and is being furnished to the IRS. 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.
		3 Number of payment transactions	4 Federal income tax withheld \$		
PAYEE'S name  Street address (including apt. no.)  City or town, state or province, country, and ZIP or foreign postal code		5a January \$	5b February \$		
		5c March \$	5d April \$		
		5e May \$	5f June \$		
		5g July \$	5h August \$		
PSE'S name and telephone number		5i September \$	5j October \$		
		5k November \$	5l December \$		
Account number (see instructions)		6 State	7 State identification no.	8 State income tax withheld \$	
				\$	

Form **1099-K**

(Keep for your records)

[www.irs.gov/Form1099K](http://www.irs.gov/Form1099K)

Department of the Treasury - Internal Revenue Service