1616		CTED		Version A, Cycle 7 Dimensions: 7.3" x 3.5" Only Red copy is not fillable
ACQUIRER'S name, street address, of ZIP or foreign postal code, and teleph	tity or town, state or province, country, none no.	1 Amount paid to p recipient	Dayment OMB No. 1545-0108	_2019
INTE	RNAL	\$ 2 Date of sale	S 2018 Form 1099-LS	Reportable Life Insurance Sale
ACQUIRER'S TIN	PAYMENT RECIPIENT'S TIN	Issuer's name		Copy A For
PAYMENT RECIPIENT'S name	DRAF	or town, state or pro	on contact entity name, street address, ci pvince, country, ZIP or foreign postal code f different from ACQUIRER)	ty Bervice Center File with Form 1096. For Privacy Act
Street address (including apt. no.) City or town, state or province, count	ry, and ZIP or foreign postal code	t 9,	2018	and Paperwork Reduction Act Notice, see the 2018 General Instructions for
Policy number				Certain Information Returns.
Form 1099-LS Do Not Cut or Separa	Cat. No. 71383M ate Forms on This Pag	www.irs.gov/Form ge — Do No	1099LS Department of the Treasury t Cut or Separate Form	 internal Revenue Service on This Page)19

ACQUIRER'S name, street addres ZIP or foreign postal code, and tel	s, city or town, state or province, country,	CTED (if checked) 1 Amount paid to payment recipient \$ 2 Date of sale	O OMB No. 1545-0108 2018 Form 1099-LS	Version A, Cycle 7 Dimensions: 7.3" x 3.5" nly Red copy is not fillable 2019 Reportable Life Insurance Sale
ACQUIRER'S TIN	PAYMENT RECIPIENT'S TIN	Issuer's name		Copy B For Payment
PAYMENT RECIPIENT'S name Street address (including apt. no.)	DRAF		entity name, street address, city intry, ZIP or foreign postal code, from ACQUIRER)	Recipient
	untry, and ZIP or foreign postal code	t 9, 2	2018	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-LS	(keep for your records)	www.irs.gov/Form1099LS	Department of the Treasury -	Internal Revenue Service

Instructions for Payment Recipient

An acquirer of a life insurance contract or any interest in a life insurance contract in a reportable policy sale under section 6050Y must give this form to you for payments made to you in the reportable policy sale.

Payment Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the acquirer has reported your complete TIN to the IRS.

Policy number. Shows the policy number the life insurance company assigned to the life insurance contract.

Box 1. Shows the amount paid to you in the reportable policy sale under section 6050Y.

Box 2. Shows the date of sale.

aust 9, 201

Issuer's name. Shows the life insurance company that issued the life insurance contract acquired in the reportable policy sale under section 6050Y.

Acquirer's information contact name, address, and phone number. Shows the contact information of the acquirer. If blank, the contact information is the same as the ACQUIRER. **Future developments.** For the latest developments related to Form 1099-LS and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099LS.

Version A, Cycle 7 Dimensions: 7.3" x 3.5" Only Red copy is not fillable

		CTED (if checked)		Only Red copy is not fillable
ACQUIRER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Amount paid to payment recipient (optional)	OMB No. 1545-0108	2019
INTE	RNAL	\$ 2 Date of sale	2018	Reportable Life Insurance Sale
			Form 1099-LS	
ACQUIRER'S TIN	PAYMENT RECIPIENT'S TIN	Issuer's name		Copy C For Issuer
PAYMENT RECIPIENT'S name		Acquirer's information contact entity name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ACQUIRER)		-
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code		t 9, 2	.018	only. Only the payment recipient is required to report this information on
Policy number				a tax return.
Form 1099-LS (k	eep for your records)	www.irs.gov/Form1099LS	Department of the Treasury	r - Internal Revenue Service

Instructions for Issuer

An acquirer of a life insurance contract or any interest in a life insurance contract in a reportable policy sale under section 6050Y must give this form to you to report the acquisition.

If you are the issuer, Copy C is provided to you because you have an information reporting obligation under section 6050Y(b). You must file a Form 1099-SB with respect to the reportable policy sale under section 6050Y.

Payment Recipient's taxpayer identification number (TIN). For the payment recipient's protection, this form may show only the last four digits of the payment recipient's TIN (social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN)). However, the acquirer has reported the payment recipient's complete TIN to the IRS.

Policy number. Shows the policy number assigned to the life insurance contract acquired by the acquirer.

Box 1. This box may show the amount paid to the payment recipient.

Box 2. Shows the date of sale.

Issuer's name. Shows your name as the life insurance company that issued the life insurance contract acquired in the reportable policy sale under section 6050Y.

Acquirer's information contact name, address, and phone number. Shows the contact information of the acquirer. If blank, the information is the same as ACQUIRER.

Future developments. For the latest developments related to Form 1099-LS and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form1099LS*.

Version A, Cycle 7 Dimensions: 7.3" x 3.5" Only Red copy is not fillable

		CTED			Red copy is not fillable
ACQUIRER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Amount paid to payment recipient	OMB No. 1545-0108	201	19
INTE	RNAL	\$ 2 Date of sale	2018		Reportable Life Insurance Sale
			Form 1099-LS		
ACQUIRER'S TIN	PAYMENT RECIPIENT'S TIN	Issuer's name			Copy D
					For Acquirer
PAYMENT RECIPIENT'S name		Acquirer's information contact entity name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ACQUIRER)			For Privacy Act and Paperwork Reduction Act
Street address (including apt. no.)			010		Notice, see the 2018 General Instructions for
City or town, state or province, count	rry, and ZIP or foreign postal code	ι 3, 2	2018		Certain Information
Policy number					Returns.
Form 1099-LS	www.irs.gov/Form1099	LS	Department of the Treasur	y - Int	ternal Revenue Service

2019



2020

2020

Version A, Cycle 7 Dimensions: 7.3" x 3.5" Only Red copy is not fillable March 31,

Instructions for Acquirer

To complete Form 1099-LS, use:

• The 2018 General Instructions for Certain Information Returns, and

• The 2018 Instructions for Form 1099-LS.

To get or to order these instructions, go to www.irs.gov/Form1099LS.

Due dates. Furnish Copy B of this form to the policyholder by January 31, 2019.

Furnish Copy C of this form to the issuer no later than January 15, 2019.

File Copy A of this form with the IRS by February 28, 2019. If you file electronically, the due date is April 1, 2019. To file electronically, you must have software that generates a file according to the specifications in Pub. 1220. The IRS does not provide a fill-in form option for Copy A.

Need help? If you have questions about reporting on Form 1099-LS, call the information reporting customer service site toll free at 866-455-7438 or 304-263-8700 (not toll free). Persons with a hearing or speech disability with access to TTY/TDD equipment can call 304-579-4827 (not toll free).