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CORRECTED

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|--|--------------------------|------------------------------|
| ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. | 1 Investment in contract | OMB No. 1545-2281 |
| | \$ | Form 1099-SB |
| | 2 Surrender amount | (Rev. December 2019) |
| | \$ | For calendar year 20 ____ |

Seller's Investment in Life Insurance Contract

| | |
|--|--------------|
| ISSUER'S TIN | SELLER'S TIN |
| SELLER'S name | |
| Street address (including apt. no.) | |
| City or town, state or province, country, and ZIP or foreign postal code | |
| Policy number | |

Issuer's information contact name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ISSUER)

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.**

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

CORRECTED (if checked)

| | | | | |
|--|--------------|---|--|---|
| ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. | | 1 Investment in contract | OMB No. 1545-2281 Form 1099-SB (Rev. December 2019) For calendar year 20 ____ | Seller's Investment in Life Insurance Contract |
| | | \$ | | |
| 2 Surrender amount | \$ | | | |
| | | | | |
| ISSUER'S TIN | SELLER'S TIN | Issuer's information contact name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ISSUER) | | Copy B For Seller 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 this item is required to be reported and the IRS determines that it has not been reported. |
| SELLER'S name | | | | |
| Street address (including apt. no.) | | | | |
| City or town, state or province, country, and ZIP or foreign postal code | | | | |
| Policy number | | | | |

Form **1099-SB** (Rev. 12-2019)

(keep for your records)

www.irs.gov/Form1099SB

Department of the Treasury - Internal Revenue Service

Instructions for Seller

The issuer of an insurance policy must furnish this form to you upon receiving notice of a transfer of your life insurance contract in a reportable policy sale under section 6050Y or the transfer of your life insurance contract to a foreign person reportable under section 6050Y.

Seller'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 issuer has reported your complete TIN to the IRS.

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

Box 1. Shows the issuer's estimate of your investment in the contract (as defined in section 72(e)(6)).

Box 2. Shows the amount that you would have received upon surrender of the life insurance contract transferred.

Issuer's information contact name, address, and phone number. Shows the contact information of the issuer. The contact information provided will give you direct access to a person who can answer questions about this form. If blank, the contact information is the same as the ISSUER.

Future developments. For the latest developments related to Form 1099-SB and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form1099SB.

CORRECTED (if checked)

| | | | | |
|--|--------------|---|--|--|
| ISSUER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. | | 1 Investment in contract | OMB No. 1545-2281 Form 1099-SB (Rev. December 2019) For calendar year 20 ____ | Seller's Investment in Life Insurance Contract |
| | | \$ | | |
| 2 Surrender amount | \$ | | | |
| | | | | |
| ISSUER'S TIN | SELLER'S TIN | Issuer's information contact name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. (if different from ISSUER) | | Copy C For Issuer For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns. |
| SELLER'S name | | | | |
| Street address (including apt. no.) | | | | |
| City or town, state or province, country, and ZIP or foreign postal code | | | | |
| Policy number | | | | |

Form **1099-SB** (Rev. 12-2019)

(keep for your records)

www.irs.gov/Form1099SB

Department of the Treasury - Internal Revenue Service

Instructions for Issuer

To complete Form 1099-SB, use:

- The current General Instructions for Certain Information Returns, and
- The current Instructions for Form 1099-SB.

To get or to order these instructions, go to www.irs.gov/Form1099SB.

Filing and furnishing. For filing and furnishing instructions, including due dates, and to request filing or furnishing extensions, see the current General Instructions for Certain Information Returns.

To file electronically, you must have software that generates a file according to the specifications in Pub. 1220.

Need help? If you have questions about reporting on Form 1099-SB, 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).