



## Attention:

Copy A of this form is provided for informational purposes only. Copy A appears in red, similar to the official IRS form. The official printed version of Copy A of this IRS form is scannable, but the online version of it, printed from this website, is not. Do **not** print and file copy A downloaded from this website; a penalty may be imposed for filing with the IRS information return forms that can't be scanned. See part O in the current General Instructions for Certain Information Returns, available at [www.irs.gov/form1099](http://www.irs.gov/form1099), for more information about penalties.

Please note that Copy B and other copies of this form, which appear in black, may be downloaded and printed and used to satisfy the requirement to provide the information to the recipient.

To order official IRS information returns, which include a scannable Copy A for filing with the IRS and all other applicable copies of the form, visit [www.IRS.gov/orderforms](http://www.IRS.gov/orderforms). Click on [Employer and Information Returns](#), and we'll mail you the forms you request and their instructions, as well as any publications you may order.

Information returns may also be filed electronically using the IRS Filing Information Returns Electronically (FIRE) system (visit [www.IRS.gov/FIRE](http://www.IRS.gov/FIRE)) or the IRS Affordable Care Act Information Returns (AIR) program (visit [www.IRS.gov/AIR](http://www.IRS.gov/AIR)).

See IRS Publications 1141, 1167, and 1179 for more information about printing these tax forms.

**Interest  
Income**

**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.**

|   |  |                               |  |   |  |
|---|--|-------------------------------|--|---|--|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |  | Payer's RTN (optional)        |  | OMB No. 1545-0112                           |  |
|   |  | 1 Interest income             |  | Form <b>1099-INT</b><br>(Rev. January 2022) |  |
|   |  | \$                            |  | For calendar year<br>20 ____                |  |
| PAYER'S TIN   |  | RECIPIENT'S TIN               |  | 2 Early withdrawal penalty                  |  |
|   |  |                               |  | \$  |  |
| RECIPIENT'S name  |  | 4 Federal income tax withheld |  | 5 Investment expenses                       |  |
| Street address (including apt. no.)   |  | \$                            |  | \$  |  |
| City or town, state or province, country, and ZIP or foreign postal code  |  | 6 Foreign tax paid            |  | 7 Foreign country or U.S. possession        |  |
|   |  | \$                            |  |   |  |
|   |  | 8 Tax-exempt interest         |  | 9 Specified private activity bond interest  |  |
|   |  | \$                            |  | \$  |  |
|   |  | 10 Market discount            |  | 11 Bond premium                             |  |
|   |  | \$                            |  | \$  |  |
|   |  | FATCA filing requirement      |  | 12 Bond premium on Treasury obligations     |  |
|   |  | <input type="checkbox"/>      |  | \$  |  |
| Account number (see instructions)   |  | 2nd TIN not.                  |  | 14 Tax-exempt and tax credit bond CUSIP no. |  |
|   |  | <input type="checkbox"/>      |  | 15 State                                    |  |
|   |  |                               |  | 16 State identification no.                 |  |
|   |  |                               |  | 17 State tax withheld                       |  |
|   |  |                               |  | \$  |  |

VOID  CORRECTED

**Interest  
Income**

**Copy 1**

**For State Tax  
Department**

|   |                 |   |  |   |                             |
|---|-----------------|---|--|---|-----------------------------|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |                 | Payer's RTN (optional)                                    |  | OMB No. 1545-0112                           |                             |
|   |                 | 1 Interest income   |  | Form <b>1099-INT</b><br>(Rev. January 2022) |                             |
|   |                 | \$  |  | For calendar year<br>20 ____                |                             |
|   |                 | 2 Early withdrawal penalty                                |  |   |                             |
|   |                 | \$  |  |   |                             |
| PAYER'S TIN   | RECIPIENT'S TIN | 3 Interest on U.S. Savings Bonds and Treasury obligations |  |   |                             |
|   |                 | \$  |  |   |                             |
| RECIPIENT'S name  |                 | 4 Federal income tax withheld                             |  | 5 Investment expenses                       |                             |
|   |                 | \$  |  | \$  |                             |
| Street address (including apt. no.)   |                 | 6 Foreign tax paid  |  | 7 Foreign country or U.S. possession        |                             |
|   |                 | \$  |  |   |                             |
| City or town, state or province, country, and ZIP or foreign postal code  |                 | 8 Tax-exempt interest                                     |  | 9 Specified private activity bond interest  |                             |
|   |                 | \$  |  | \$  |                             |
|   |                 | 10 Market discount  |  | 11 Bond premium                             |                             |
|   |                 | \$  |  | \$  |                             |
|   |                 | 12 Bond premium on Treasury obligations                   |  | 13 Bond premium on tax-exempt bond          |                             |
|   |                 | \$  |  | \$  |                             |
| Account number (see instructions)   |                 | 14 Tax-exempt and tax credit bond CUSIP no.               |  | 15 State                                    | 16 State identification no. |
|   |                 |   |  |   |                             |
|   |                 |   |  |   | 17 State tax withheld       |
|   |                 |   |  |   | \$                          |
|   |                 |   |  |   | \$                          |

CORRECTED (if checked)

**Interest  
Income**

**Copy B**

**For Recipient**

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 income is taxable and the IRS determines that it has not been reported.

|   |  |   |  |   |  |
|---|--|---|--|---|--|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |  | Payer's RTN (optional)                                    |  | OMB No. 1545-0112                           |  |
|   |  | 1 Interest income   |  | Form <b>1099-INT</b><br>(Rev. January 2022) |  |
|   |  | \$  |  | For calendar year<br>20 ____                |  |
| PAYER'S TIN   |  | RECIPIENT'S TIN   |  | \$  |  |
|   |  | 2 Early withdrawal penalty                                |  | \$  |  |
|   |  | 3 Interest on U.S. Savings Bonds and Treasury obligations |  | \$  |  |
| RECIPIENT'S name  |  | <b>4 Federal income tax withheld</b>                      |  | 5 Investment expenses                       |  |
|   |  | \$  |  | \$  |  |
| Street address (including apt. no.)   |  | 6 Foreign tax paid  |  | 7 Foreign country or U.S. possession        |  |
|   |  | \$  |  |   |  |
| City or town, state or province, country, and ZIP or foreign postal code  |  | 8 Tax-exempt interest                                     |  | 9 Specified private activity bond interest  |  |
|   |  | \$  |  | \$  |  |
| FATCA filing requirement<br><input type="checkbox"/>  |  | 10 Market discount  |  | 11 Bond premium                             |  |
|   |  | \$  |  | \$  |  |
|   |  | 12 Bond premium on Treasury obligations                   |  | 13 Bond premium on tax-exempt bond          |  |
|   |  | \$  |  | \$  |  |
| Account number (see instructions)   |  | 14 Tax-exempt and tax credit bond CUSIP no.               |  | 15 State                                    |  |
|   |  |   |  | 16 State identification no.                 |  |
|   |  |   |  | 17 State tax withheld                       |  |
|   |  |   |  | \$  |  |
|   |  |   |  | \$  |  |

## Instructions for Recipient

The information provided may be different for covered and noncovered securities. For a description of covered securities, see the Instructions for Form 8949. For a taxable covered security acquired at a premium, unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize the premium under section 171, or for a tax-exempt covered security acquired at a premium, your payer must generally report either (1) a net amount of interest that reflects the offset of the amount of interest paid to you by the amount of premium amortization allocable to the payment(s), or (2) a gross amount for both the interest paid to you and the premium amortization allocable to the payment(s). If you did notify your payer that you did not want to amortize the premium on a taxable covered security, then your payer will only report the gross amount of interest paid to you. For a noncovered security acquired at a premium, your payer is only required to report the gross amount of interest paid to you.

**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 issuer has reported your complete TIN to the IRS.

**FATCA filing requirement.** If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its chapter 4 account reporting requirement. You may also have a filing requirement. See the Instructions for Form 8938.

**Account number.** May show an account or other unique number the payer assigned to distinguish your account.

**Box 1.** Shows taxable interest paid to you during the calendar year by the payer. This does not include interest shown in box 3. May also show the total amount of the credits from clean renewable energy bonds, new clean renewable energy bonds, qualified energy conservation bonds, qualified zone academy bonds, qualified school construction bonds, and build America bonds that must be included in your interest income. These amounts were treated as paid to you during the calendar year on the credit allowance dates (March 15, June 15, September 15, and December 15). For more information, see Form 8912. See the instructions above for a taxable covered security acquired at a premium.

**Box 2.** Shows interest or principal forfeited because of early withdrawal of time savings. You may deduct this amount to figure your adjusted gross income on your income tax return. See the Instructions for Form 1040 to see where to take the deduction.

**Box 3.** Shows interest on U.S. Savings Bonds, Treasury bills, Treasury bonds, and Treasury notes. This may or may not all be taxable. See Pub. 550. This interest is exempt from state and local income taxes. This interest is not included in box 1. See the instructions above for a taxable covered security acquired at a premium.

**Box 4.** Shows backup withholding. Generally, a payer must backup withhold if you did not furnish your TIN or you did not furnish the correct TIN to the payer. See Form W-9. Include this amount on your income tax return as tax withheld.

**Box 5.** Any amount shown is your share of investment expenses of a single-class REMIC. This amount is included in box 1. **Note:** This amount is not deductible.

**Box 6.** Shows foreign tax paid. You may be able to claim this tax as a deduction or a credit on your Form 1040 or 1040-SR. See your tax return instructions.

**Box 7.** Shows the country or U.S. possession to which the foreign tax was paid.

**Box 8.** Shows tax-exempt interest paid to you during the calendar year by the payer. See how to report this amount in the Instructions for Form 1040. This amount may be subject to backup withholding. See *Box 4* above. See the instructions above for a tax-exempt covered security acquired at a premium.

**Box 9.** Shows tax-exempt interest subject to the alternative minimum tax. This amount is included in box 8. See the Instructions for Form 6251. See the instructions above for a tax-exempt covered security acquired at a premium.

**Box 10.** For a taxable or tax-exempt covered security, if you made an election under section 1278(b) to include market discount in income as it accrues and you notified your payer of the election in writing in accordance with Regulations section 1.6045-1(n)(5), shows the market discount that accrued on the debt instrument during the year while held by you, unless it was reported on Form 1099-OID. For a taxable or tax-exempt covered security acquired on or after January 1, 2015, accrued market discount will be calculated on a constant yield basis unless you notified your payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to make a constant yield election for market discount under section 1276(b). Report the accrued market discount on your income tax return as directed in the Instructions for Form 1040. Market discount on a tax-exempt security is includible in taxable income as interest income.

*(Continued on the back of Copy 2.)*

CORRECTED (if checked)

**Interest  
Income**

**Copy 2**

**To be filed with  
recipient's state  
income tax  
return, when  
required.**

|   |                 |   |  |   |                             |
|---|-----------------|---|--|---|-----------------------------|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |                 | Payer's RTN (optional)                                    |  | OMB No. 1545-0112                           |                             |
|   |                 | 1 Interest income   |  | Form <b>1099-INT</b><br>(Rev. January 2022) |                             |
|   |                 | \$  |  | For calendar year<br>20 ____                |                             |
|   |                 | 2 Early withdrawal penalty                                |  |   |                             |
|   |                 | \$  |  |   |                             |
| PAYER'S TIN   | RECIPIENT'S TIN | 3 Interest on U.S. Savings Bonds and Treasury obligations |  |   |                             |
|   |                 | \$  |  |   |                             |
| RECIPIENT'S name  |                 | 4 Federal income tax withheld                             |  | 5 Investment expenses                       |                             |
|   |                 | \$  |  | \$  |                             |
| Street address (including apt. no.)   |                 | 6 Foreign tax paid  |  | 7 Foreign country or U.S. possession        |                             |
|   |                 | \$  |  |   |                             |
| City or town, state or province, country, and ZIP or foreign postal code  |                 | 8 Tax-exempt interest                                     |  | 9 Specified private activity bond interest  |                             |
|   |                 | \$  |  | \$  |                             |
|   |                 | 10 Market discount  |  | 11 Bond premium                             |                             |
|   |                 | \$  |  | \$  |                             |
|   |                 | 12 Bond premium on Treasury obligations                   |  | 13 Bond premium on tax-exempt bond          |                             |
|   |                 | \$  |  | \$  |                             |
| Account number (see instructions)   |                 | 14 Tax-exempt and tax credit bond CUSIP no.               |  | 15 State                                    | 16 State identification no. |
|   |                 |   |  |   |                             |
|   |                 |   |  |   | 17 State tax withheld       |
|   |                 |   |  |   | \$                          |
|   |                 |   |  |   | \$                          |

## Instructions for Recipient *(continued)*

**Box 11.** For a taxable covered security (other than a U.S. Treasury obligation), shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the security. If an amount is not reported in this box for a taxable covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 1. If the amount in box 11 is greater than the amount of interest paid on the covered security, see Regulations section 1.171-2(a)(4).

**Box 12.** For a U.S. Treasury obligation that is a covered security, shows the amount of premium amortization allocable to the interest payment(s), unless you notified the payer in writing in accordance with Regulations section 1.6045-1(n)(5) that you did not want to amortize bond premium under section 171. If an amount is reported in this box, see the Instructions for Schedule B (Form 1040) to determine the net amount of interest includible in income on Form 1040 or 1040-SR with respect to the U.S. Treasury obligation. If an amount is not reported in this box for a U.S. Treasury obligation that is a covered security acquired at a premium and the payer is reporting premium amortization, the payer has reported a net amount of interest in box 3. If the amount in box 12 is greater than the amount of interest paid on the U.S. Treasury obligation, see Regulations section 1.171-2(a)(4).

**Box 13.** For a tax-exempt covered security, shows the amount of premium amortization allocable to the interest payment(s). If an amount is reported in this box, see Pub. 550 to determine the net amount of tax-exempt interest reportable on Form 1040 or 1040-SR. If an amount is not reported in this box for a tax-exempt covered security acquired at a premium, the payer has reported a net amount of interest in box 8 or 9, whichever is applicable. If the amount in box 13 is greater than the amount of interest paid on the tax-exempt covered security, the excess is a nondeductible loss. See Regulations section 1.171-2(a)(4)(ii).

**Box 14.** Shows CUSIP number(s) for tax-exempt bond(s) on which tax-exempt interest was paid, or tax credit bond(s) on which taxable interest was paid or tax credit was allowed, to you during the calendar year. If blank, no CUSIP number was issued for the bond(s).

**Boxes 15–17.** State tax withheld reporting boxes.

**Nominees.** If this form includes amounts belonging to another person(s), you are considered a nominee recipient. Complete a Form 1099-INT for each of the other owners showing the income allocable to each. File Copy A of the form with the IRS. Furnish Copy B to each owner. List yourself as the “payer” and the other owner(s) as the “recipient.” File Form(s) 1099-INT with Form 1096 with the Internal Revenue Service Center for your area. On Form 1096, list yourself as the “filer.” A spouse is not required to file a nominee return to show amounts owned by the other spouse.

**Future developments.** For the latest information about developments related to Form 1099-INT and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/Form1099INT](http://www.irs.gov/Form1099INT).

**Free File Program.** Go to [www.irs.gov/FreeFile](http://www.irs.gov/FreeFile) to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

VOID  CORRECTED

**Interest  
Income**

**Copy C**

**For Payer**

For Privacy Act  
and Paperwork  
Reduction Act  
Notice, see the  
**current General  
Instructions for  
Certain  
Information  
Returns.**

|   |                 |   |  |   |  |
|---|-----------------|---|--|---|--|
| PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. |                 | Payer's RTN (optional)                                    |  | OMB No. 1545-0112                           |  |
|   |                 | 1 Interest income   |  | Form <b>1099-INT</b><br>(Rev. January 2022) |  |
|   |                 | \$  |  | For calendar year<br>20 ____                |  |
|   |                 | 2 Early withdrawal penalty                                |  |   |  |
|   |                 | \$  |  |   |  |
| PAYER'S TIN   | RECIPIENT'S TIN | 3 Interest on U.S. Savings Bonds and Treasury obligations |  |   |  |
|   |                 | \$  |  |   |  |
| RECIPIENT'S name  |                 | 4 Federal income tax withheld                             |  | 5 Investment expenses                       |  |
|   |                 | \$  |  | \$  |  |
| Street address (including apt. no.)   |                 | 6 Foreign tax paid  |  | 7 Foreign country or U.S. possession        |  |
|   |                 | \$  |  |   |  |
| City or town, state or province, country, and ZIP or foreign postal code  |                 | 8 Tax-exempt interest                                     |  | 9 Specified private activity bond interest  |  |
|   |                 | \$  |  | \$  |  |
|   |                 | 10 Market discount  |  | 11 Bond premium                             |  |
|   |                 | \$  |  | \$  |  |
|   |                 | FATCA filing requirement<br><input type="checkbox"/>      |  | 12 Bond premium on Treasury obligations     |  |
|   |                 | \$  |  | 13 Bond premium on tax-exempt bond          |  |
|   |                 | 14 Tax-exempt and tax credit bond CUSIP no.               |  | 15 State                                    |  |
| Account number (see instructions)   |                 | 2nd TIN not.<br><input type="checkbox"/>                  |  | 16 State identification no.                 |  |
|   |                 |   |  | 17 State tax withheld                       |  |
|   |                 |   |  | \$  |  |
|   |                 |   |  | \$  |  |



## Instructions for Payer

To complete Form 1099-INT, use:

- The current General Instructions for Certain Information Returns, and
- The current Instructions for Forms 1099-INT and 1099-OID.

To order these instructions and additional forms, go to [www.irs.gov/EmployerForms](http://www.irs.gov/EmployerForms).

**Caution:** Because paper forms are scanned during processing, you cannot file certain Forms 1096, 1097, 1098, 1099, 3921, or 5498 that you print from the IRS website.

**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.

**Forms 1099-INT and 1098.** If you received mortgage interest in the course of your trade or business, you may have to report it to the payer of such mortgage interest and to the IRS on Form 1098, Mortgage Interest Statement. Do not report mortgage interest to the payer on Form 1099-INT. See the Instructions for Form 1098 for information on reporting mortgage interest.

**Foreign recipient.** If the recipient is a nonresident alien, you may have to withhold federal income tax and file Form 1042-S. See the Instructions for Form 1042-S and Pub. 515.

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