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. 1545-2281	
Tax Form Issuer, Inc 12021 Sunset Valley Dr Suite 230 Preston, VA 20191 888-555-1212		\$ 1200.00 2 Date of sale	Form <b>1099-LS</b> (Rev. December 2019)	Reportable Life Insurance Sale
		07/01/2020	For calendar year 20 _22_	ilisulance Sale
ACQUIRER'S TIN	PAYMENT RECIPIENT'S TIN	Issuer's name		Copy B
12-3456789	xxx-xx-1234	R I Associates		For Payment
PAYMENT RECIPIENT'S name  Kris Q Public		Acquirer's information contact 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.)  1 Main St		J Q Public 1 Main St Melrose, NY 12121		you are required to file a
				return, a negligence penalty or other
City or town, state or province, country, and ZIP or foreign postal code Melrose, NY 12121				sanction may be imposed on you if this item is required to be
Policy number string				reported and the IRS determines that it has not been reported.

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

(keep for your records)

www.irs.gov/Form1099LS

Department of the Treasury - Internal Revenue Service

## **QR CODE WITH TAX DOCUMENT DATA**

The Financial Data Exchange standards-setting organization defines the use of QR codes for US Tax data.

For more information about how this code can be used visit: https://financialdataexchange.org/us-tax



