

## Attention:

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

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FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		FILER'S federal identification no.		OMB No. 1545-2205		<b>2015</b> Form <b>1099-K</b>	<b>Payment Card and Third Party Network Transactions</b>	
		PAYEE'S taxpayer identification no.						
		<b>1a</b> Gross amount of payment card/third party network 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"/>		<b>1b</b> Card Not Present transactions \$		<b>2</b> Merchant category code		<b>Copy A</b> <b>For Internal Revenue Service Center</b>
				<b>3</b> Number of payment transactions		<b>4</b> Federal income tax withheld \$		
PAYEE'S name		<b>5a</b> January \$		<b>5b</b> February \$		<b>File with Form 1096.</b>  For Privacy Act and Paperwork Reduction Act Notice, see the <b>2015 General Instructions for Certain Information Returns.</b>		
Street address (including apt. no.)		<b>5c</b> March \$		<b>5d</b> April \$				
		<b>5e</b> May \$		<b>5f</b> June \$				
City or town, state or province, country, and ZIP or foreign postal code		<b>5g</b> July \$		<b>5h</b> August \$				
		<b>5i</b> September \$		<b>5j</b> October \$				
PSE'S name and telephone number		<b>5k</b> November \$		<b>5l</b> December \$				
		<b>6</b> State		<b>7</b> State identification no.				
Account number (see instructions)		2nd TIN not. <input type="checkbox"/>		<b>8</b> State income tax withheld \$				

Form **1099-K**

Cat. No. 54118B

[www.irs.gov/form1099k](http://www.irs.gov/form1099k)

Department of the Treasury - Internal Revenue Service

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FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		FILER'S federal identification no.	OMB No. 1545-2205		<b>Payment Card and Third Party Network Transactions</b>	
		PAYEE'S taxpayer identification no.	<div style="font-size: 2em; font-weight: bold;">2015</div>			
		<b>1a</b> Gross amount of payment card/third party network transactions \$				Form <b>1099-K</b>
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"/>		<b>1b</b> Card Not Present transactions \$	<b>2</b> Merchant category code	<b>Copy 1 For State Tax Department</b>
		<b>3</b> Number of payment transactions	<b>4</b> 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		<b>5a</b> January \$	<b>5b</b> February \$			
		<b>5c</b> March \$	<b>5d</b> April \$			
		<b>5e</b> May \$	<b>5f</b> June \$			
		<b>5g</b> July \$	<b>5h</b> August \$			
PSE'S name and telephone number		<b>5i</b> September \$	<b>5j</b> October \$			
		<b>5k</b> November \$	<b>5l</b> December \$			
Account number (see instructions)		<b>6</b> State	<b>7</b> State identification no.	<b>8</b> State income tax withheld \$		
				----- \$		

☐ 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 federal identification no.	OMB No. 1545-2205		
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		<b>3</b> Number of payment transactions	<b>4</b> 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		<b>5a</b> January \$	<b>5b</b> February \$		
		<b>5c</b> March \$	<b>5d</b> April \$		
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PSE'S name and telephone number		<b>6</b> State	<b>7</b> State identification no.		<b>8</b> State income tax withheld \$
					\$
Account number (see instructions)					

Form **1099-K**

(Keep for your records)

[www.irs.gov/form1099k](http://www.irs.gov/form1099k)

Department of the Treasury - Internal Revenue Service

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		<b>3</b> Number of payment transactions	<b>4</b> 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		<b>5a</b> January \$	<b>5b</b> February \$		
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Account number (see instructions)		2nd TIN not. <input type="checkbox"/>		<b>6</b> State \$	
				<b>7</b> State identification no. \$	
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**Payment Card and  
Third Party  
Network  
Transactions**

**Copy C  
For FILER**

For Privacy Act and Paperwork Reduction Act Notice, see the **2015 General Instructions for Certain Information Returns.**