

CORRECTED (if checked)

| | | | |
|--|------------------------------------|---|--|
| FILER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number | | 1 Date of closing | OMB No. 1545-0997 2015 Form 1099-S |
| | | 2 Gross proceeds \$ | |
| FILER'S federal identification number | TRANSFEROR'S identification number | 3 Address or legal description | |
| TRANSFEROR'S name | | | |
| Street address (including apt. no.) | | 4 Transferor received or will receive property or services as part of the consideration (if checked) <input type="checkbox"/> | |
| City or town, state or province, country, and ZIP or foreign postal code | | | |
| Account or escrow number (see instructions) | | 5 Buyer's part of real estate tax \$ | |

Proceeds From Real Estate Transactions

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For Transferor
This is important tax information and is being furnished to the Internal Revenue Service. 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.

Form **1099-S**

(keep for your records)

www.irs.gov/form1099s

Department of the Treasury - Internal Revenue Service