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 VOID CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Unemployment compensation		OMB No. 1545-0120	
		\$		2017 Form 1099-G	
PAYER'S federal identification number		2 State or local income tax refunds, credits, or offsets			
		\$		\$	
PAYER'S federal identification number		RECIPIENT'S identification number		3 Box 2 amount is for tax year	
RECIPIENT'S name		5 RTAA payments		6 Taxable grants	
Street address (including apt. no.)		\$		\$	
City or town, state or province, country, and ZIP or foreign postal code		7 Agriculture payments		8 Check if box 2 is trade or business income <input type="checkbox"/>	
Account number (see instructions)		\$		9 Market gain	
		10a State		10b State identification no.	
				11 State income tax withheld	
				\$	
				\$	

**Certain
Government
Payments**

Copy A

**For
Internal Revenue
Service Center**

File with Form 1096.

For Privacy Act
and Paperwork
Reduction Act
Notice, see the 2017

**General
Instructions for
Certain Information
Returns.**

Form 1099-G

Cat. No. 14438M

www.irs.gov/form1099g

Department of the Treasury - Internal Revenue Service

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