

VOID  CORRECTED

CORPORATION'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Date of sale or exchange	OMB No. 1545-1814
		2 Aggregate amount rec'd*	Form <b>1099-CAP</b> (Rev. September 2019) For calendar year 20 ____
		\$	
CORPORATION'S TIN	SHAREHOLDER'S TIN	3 No. of shares exchanged	4 Classes of stock exchanged
SHAREHOLDER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code			
		5	
Account number (see instructions)		* The shareholder cannot claim a loss based on the amount in box 2.	

### Changes in Corporate Control and Capital Structure

**Copy C**  
For Corporation, Broker or State Copy

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

Form **1099-CAP** (Rev. 9-2019)

[www.irs.gov/Form1099CAP](http://www.irs.gov/Form1099CAP)

Department of the Treasury - Internal Revenue Service

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Department of the Treasury - Internal Revenue Service

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