

Label (See page 8.) Use the IRS label. Otherwise, please print or type. Presidential Election Campaign (page 9)

Labels: Your first name and initial (Anthony M), Last name (Jackson), Home address, City, town or post office, state, and ZIP code.

Your social security number, Spouse's social security number, You must enter your SSN(s) above, Checking a box below will not change your tax or refund.

Check here if you, or your spouse if a joint return, want \$3 to go to this fund [] You [] Spouse

Income Attach Form(s) W-2 here. Enclose, but do not attach, any payment.

Table with 3 columns: Line number, Description, and Amount. Lines 1-6 include Wages, Taxable interest, Unemployment compensation, Adjusted gross income, and Taxable income.

Payments and tax

Table with 3 columns: Line number, Description, and Amount. Lines 7-10 include Federal income tax withheld, Earned income credit, Total payments, and Tax.

Refund Have it directly deposited! See page 15 and fill in 11b, 11c, and 11d or Form 8888.

Table with 3 columns: Line number, Description, and Amount. Lines 11a-11d include Refund calculation, Routing number, Account number, and Type (Checking/Savings).

Amount you owe

Table with 3 columns: Line number, Description, and Amount. Line 12: If line 10 is larger than line 9, subtract line 9 from line 10.

Third party designee

Do you want to allow another person to discuss this return with the IRS (see page 16)? [] Yes. Complete the following. [] No. Designee's name, Phone no., Personal identification number (PIN).

Sign here

Under penalties of perjury, I declare that I have examined this return, and to the best of my knowledge and belief, it is true, correct, and accurately lists all amounts and sources of income I received during the tax year. Date 01/29/15, Occupation Carpet Installer.

Paid preparer's use only

Preparer's signature, Date, Check if self-employed [], Preparer's SSN or PTIN, Firm's name, EIN, Phone no.

7011 2000 0001 7427 6606

COPY

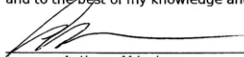
Form 1099-MISC

 CORRECTED (if checked)

(keep for your records)

PAYER'S name, street address, city, state, ZIP code, and telephone no.		1 Rents \$	OMB No. 1545-0115 2007	Miscellaneous Income 38-2098003 Department of the Treasury — IRS Form 1099-MISC Copy B For Recipient
		2 Royalties \$	4 Fed. Inc. tax withheld \$	
		3 Other income \$	5 Fishing boat proceeds \$	
		6 Medical and health care payments \$	7 Nonemployee compensation \$ -0-	
PAYER'S federal identification number	RECIPIENT'S identification number	8 Substitute payments in lieu of dividends or interest \$	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	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 income is taxable and the IRS determines that it has not been reported.
RECIPIENT'S name, address, and ZIP code ANTHONY JACKSON		10 Crop insurance proceeds \$	11	
Account number (see instructions)		12	13 Excess golden parachute payments \$	
		14 Gross proceeds paid to an attorney \$	15a Section 409A deferrals \$	15b Section 409A income \$
		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$

This corrected form 1099 MISC is submitted to rebut a document known to have been submitted by the party identified above as 'PAYER' which erroneously alleges a payment to the party identified above as 'RECIPIENT' of "gains, profit or income" made in the course of a "trade or business". Under penalty of perjury, I declare that I have examined this statement and to the best of my knowledge and belief, it is true, correct, and complete.


 Anthony M Jackson

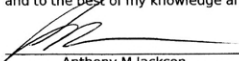
 8-29-13
 Date

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PAYER'S name, street address, city, state, ZIP code, and telephone no. CARPET		1 Rents \$	OMB No. 1545-0115 2007	Miscellaneous Income 34-2099803 Department of the Treasury — IRS Copy B For Recipient
		2 Royalties \$	Form 1099-MISC	
		3 Other income \$	4 Fed. inc. tax withheld \$	
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds \$	6 Medical and health care payments \$	
RECIPIENT'S name, address, and ZIP code ANTHONY JACKSON		7 Nonemployee compensation \$ -0-	8 Substitute payments in lieu of dividends or interest \$	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 income is taxable and the IRS determines that it has not been reported.
		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$	
		11	12	
Account number (see instructions)		13 Excess golden parachute payments \$	14 Gross proceeds paid to an attorney \$	
15a Section 408A deferrals \$	15b Section 408A income \$	16 State tax withheld \$	17 State/Payer's state no. \$	18 State income \$

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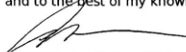
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