

☐ CORRECTED (if checked)

|                                                                                                                                                                                                                               |                                   |                                                                                                             |                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| CREDITOR'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.<br><br><b>John Doe</b><br><b>123 s 2nd st</b><br><b>Miami, FI - 33139</b><br><b>(123)-456-7899</b>   |                                   | 1 Date of identifiable event                                                                                | OMB No. 1545-1424                       |
|                                                                                                                                                                                                                               |                                   | 2 Amount of debt discharged<br>\$ <b>1000</b>                                                               | Form <b>1099-C</b><br>(Rev. April 2025) |
|                                                                                                                                                                                                                               |                                   | 3 Interest, if included in box 2<br>\$                                                                      | For calendar year<br><b>2025</b>        |
| CREDITOR'S TIN<br><b>12-3456789</b>                                                                                                                                                                                           | DEBTOR'S TIN<br><b>xxx-xx-123</b> | 4 Debt description                                                                                          |                                         |
| DEBTOR'S name<br><br><b>James Smith</b><br><br>Street address (including apt. no.)<br><b>456 w 3rd St</b><br><br>City or town, state or province, country, and ZIP or foreign postal code<br><b>Beverly Hills, CA - 90210</b> |                                   |                                                                                                             |                                         |
| Account number (see instructions)<br><b>123456789</b>                                                                                                                                                                         |                                   | 6 Identifiable event code                                                                                   | 7 Fair market value of property<br>\$   |
|                                                                                                                                                                                                                               |                                   | 5 If checked, the debtor was personally liable for repayment of the debt . . . . . <input type="checkbox"/> |                                         |

**Cancellation  
of Debt**

**Copy B  
For Debtor**

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if taxable income results from this transaction and the IRS determines that it has not been reported.