

VOID  CORRECTED

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			1 Rents		OMB No. 1545-0115  <b>2019</b> Form <b>1099-MISC</b>	<b>Miscellaneous Income</b>		
			\$					
			2 Royalties					
PAYER'S TIN			3 Other income		4 Federal income tax withheld			
			\$		\$			
RECIPIENT'S TIN			5 Fishing boat proceeds		6 Medical and health care payments			
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code			\$		\$			
			7 Nonemployee compensation		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"/>		10 Crop insurance proceeds			
Account number (see instructions)			FATCA filing requirement <input type="checkbox"/>	2nd TIN not <input type="checkbox"/>	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
\$		\$		\$		\$		\$

Form **1099-MISC**

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

DETACH BEFORE MAILING  
MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS

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Department of the Treasury - Internal Revenue Service