☐ 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			
				\$	2020	Miscellaneous		
				2 Royalties			Income	
				\$	Form 1099-MISC			
				3 Other income	4 Federal income tax wit	hheld	Copy C	
<u></u>				\$	\$	For Payer		
PAYER'S TIN RECIPIENT'S TIN			5 Fishing boat proceeds	6 Medical and health care payments				
				\$	\$			
RECIPIENT'S name				7 Payer made direct sales of	8 Substitute payments in	lieu of	of For Privacy Act	
				\$5,000 or more of consumer products to a buyer	dividends or interest		and Paperwork	
				(recipient) for resale	\$		Reduction Act	
Street address (including apt. no.)				9 Crop insurance proceeds	10 Gross proceeds paid t attorney	to an	Notice, see the 2020 General	
				\$	\$		Instructions for	
City or town, state or province, country, and ZIP or foreign postal code				11	12 Section 409A deferrals	s Certain		
							Information	
					\$		Returns.	
Account number (see instructions)		FATCA filing requirement	2nd TIN not	13 Excess golden parachute payments	14 Nonqualified deferred compensation			
				\$	\$			
				15 State tax withheld	16 State/Payer's state no	١.	17 State income	
				\$			\$	
				\$			\$	

Form 1099-MISC

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service