

☐ 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 2019 Form 1099-MISC	Miscellaneous Income	
			\$				
			2 Royalties				
PAYER'S TIN			3 Other income		4 Federal income tax withheld		Copy C For Payer
			\$		\$		
			5 Fishing boat proceeds		6 Medical and health care payments		
RECIPIENT'S name Street address (including apt. no.) 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	For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.	
			\$		\$		
			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)		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