	_\	/OID	∐ C	ORRE	CTED		_	
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		Miscellaneous	
				2 Royalties			Income	
					\$	Form 1099-MISC		
					3 Other income	4 Federal income tax	withheld	
 -				\$	\$		Copy 1	
PAYER'S TIN	RECIPIENT'S TIN			5 Fishing boat proceeds	6 Medical and health care payments		For State Tax Department	
					\$	\$		
RECIPIENT'S name				7 Nonemployee compensation	Substitute payments in lieu of dividends or interest			
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code				\$	\$			
				9 Payer made direct sales of \$5,000 or more of consumer products to a buyer	10 Crop insurance proceeds			
				(recipient) for resale ►	\$			
				11	12			
Account number (see instructions) FATCA filing requirement				13 Excess golden parachute payments	14 Gross proceeds paid to an attorney			
	T				\$	\$		
15a Section 409A deferrals 15b Section 409		on 409A inco	9A 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