	∨	OID [CIED			
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			1 Rents \$ 2 Royalties	OMB No. 1545-0115	ı	Miscellaneous Income	
				\$	Form 1099-MISC		moonio
				3 Other income	4 Federal income tax	withheld	Copy C
				\$	\$		For Payer
PAYER'S federal identification number	RECIPIEN	T'S identificat	ion number	5 Fishing boat proceeds	6 Medical and health care	payments	
				 \$	 \$		
RECIPIENT'S name				7 Nonemployee compensation	Substitute payments in lieu of dividends or interest		For Privacy Act and Paperwork
Street address (including apt. no.)				 	 \$		Reduction Act
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 (recipient) for resale ▶	10 Crop insurance proceeds		Notice, see the 2017 General Instructions for Certain
				11	12		Information Returns.
Account number (see instructions)		FATCA filing requirement		.13 Excess golden parachute payments	14 Gross proceeds paid to an attorney		
15a Section 409A deferrals 15b Section 409A income		e	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