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☐ 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		Miscellaneous Income
Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555				\$		2019		
				2 Royalties				
PAYER'S TIN XX-XXXXXXX				\$		Form 1099-MISC		Copy A For Internal Revenue Service Center
				3 Other income		4 Federal income tax withheld		
RECIPIENT'S TIN YY-YYYYYYY3				5 Fishing boat proceeds		6 Medical and health care payments		
RECIPIENT'S name				\$		\$		File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.
Street address (see instructions)				7 Nonemployee compensation		8 Substitute payments in lieu of dividends or interest		
Recipient Name				\$ 9,875,383.39		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>		
Street Address Line 1 Line 2				10 Crop insurance proceeds		11		
City or town, state or province, country, and ZIP or foreign postal code				12		13 Excess golden parachute payments		
City, State 11111				14 Gross proceeds paid to an attorney		15a Section 109A deferrals		18 State income
Account number (see instructions)				16 State tax withheld		17 State/Payer's state no.		
FATCA filing requirement <input type="checkbox"/> 2nd TIN not <input type="checkbox"/>				18 State income		\$		
15b Section 409A income				\$		\$		

Form 1099-MISC

Cat. No. 14425J

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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