	☐ CORRE	ECTED (if checked)		
PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code, and telephone no.  Payer Name, LLC  Address Line 1  City, State 00000  (555) 555-5555		1 Rents \$ 2 Royalties	OMB No. 1545-0115 20 <b>1 3</b> Form <b>1099-MISC</b>	Miscellaneous Income
		3 Other income	4 Federal income tax withheld	nheld
		\$	\$	Copy 2
PAYER'S federal identification number  XX-XXXXXXX	RECIPIENT'S identification number  YY-YYYYYY3	5 Fishing boat proceeds	6 Medical and health care payments	with
	11 1111110	\$	\$	recipient's state income tax return
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu o dividends or interest	wher
Recipient Name		9,875,383.39	dividends of interest	required
Street address (including apt. no.)		\$	\$	]
Street Address Line 1		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer	10 Crop insurance proceeds	
City or town, province or state, country, and ZIP or foreign postal code		(recipient) for resale ►	\$	
City, State 11111		11 Foreign tax paid \$	12 Foreign country or U.S. possession	
Account number (see instructions)		13 Excess golden parachute	14 Gross proceeds paid to an	1
XXXXX		payments \$	attorney \$	

16 State tax withheld

\$ \$

Form 1099-MISC

15a Section 409A deferrals

www.irs.gov/form1099misc

15b Section 409A income

\$

Department of the Treasury - Internal Revenue Service

18 State income

17 State/Payer's state no.

	☐ CORRE	ECTED (if checked)		
PAYER'S name, street address, city or town, province or state, country, ZIP or foreign postal code, and telephone no. Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555		1 Rents \$ 2 Royalties	OMB No. 1545-0115 2013  Form 1099-MISC	Miscellaneous Income
(333) 333-3333		3 Other income	4 Federal income tax withheld	
		\$	\$	Copy 2
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care payments	To be filed
XX-XXXXXX	YY-YYYYY2			with recipient's
		\$	\$	state income tax return,
RECIPIENT'S name		7 Nonemployee compensation	Substitute payments in lieu of dividends or interest	when
Recipient Name		999.00	aividends or interest	required.
Street address (including apt. no.)		\$ 333.00	\$	
Street Address Line 1		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer	10 Crop insurance proceeds	
City or town, province or state, country, and ZIP or foreign postal code		(recipient) for resale ►	\$	
City, State 11111		11 Foreign tax paid \$	12 Foreign country or U.S. possession	
Account number (see instructions)		13 Excess golden parachute	14 Gross proceeds paid to an	]
XXXXX		payments \$	attorney \$	
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
	l .	\$		<u>  \$</u>
l \$	<b>  \$</b>	1\$		<b>  \$</b>