

☐ CORRECTED (if checked)

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  <b>2018</b>  Form <b>1099-MISC</b>	<b>Miscellaneous Income</b>
		\$			
		2 Royalties			
		\$			
PAYER'S TIN		RECIPIENT'S TIN		3 Other income	4 Federal income tax withheld
				\$	\$
RECIPIENT'S name  Street address (including apt. no.)  City or town, state or province, country, and ZIP or foreign postal code		5 Fishing boat proceeds		6 Medical and health care payments	<b>Copy B For Recipient</b>
		\$		\$	
		7 Nonemployee compensation		8 Substitute payments in lieu of dividends or interest	
		\$		\$	
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>		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	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
		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.
\$		\$		\$	\$
				\$	\$

Form **1099-MISC**

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[www.irs.gov/Form1099MISC](http://www.irs.gov/Form1099MISC)

Department of the Treasury - Internal Revenue Service

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