

☐ CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555		1 Rents	OMB No. 1545-0115		Miscellaneous Income	
		\$	2014 Form 1099-MISC			
		2 Royalties				
PAYER'S federal identification number XX-XXXXXXX		RECIPIENT'S identification number YY-YYYYYYY3		3 Other income	4 Federal income tax withheld	Copy 2 To be filed with recipient's state income tax return, when required.
				\$	\$	
				5 Fishing boat proceeds	6 Medical and health care payments	
RECIPIENT'S name Recipient Name Street address (including apt. no.) Street Address Line 1 City or town, state or province, country, and ZIP or foreign postal code City, State 11111		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest			
		\$ 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"/>	10 Crop insurance proceeds	\$		
Account number (see instructions) XXXXXX		11	12			
		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.	18 State income
				\$	\$	\$
		\$	\$	\$	\$	\$

Form **1099-MISC**

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service

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		\$	2014 Form 1099-MISC			
		2 Royalties				
PAYER'S federal identification number XX-XXXXXXX		RECIPIENT'S identification number YY-YYYYYYY2		3 Other income	4 Federal income tax withheld	Copy 2 To be filed with recipient's state income tax return, when required.
				\$	\$	
				5 Fishing boat proceeds	6 Medical and health care payments	
RECIPIENT'S name Recipient Name Street address (including apt. no.) Street Address Line 1 City or town, state or province, country, and ZIP or foreign postal code City, State 11111		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest			
		\$ 999.00	\$			
		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	\$		
Account number (see instructions) XXXXXX		11	12			
		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney			
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				\$	\$	\$
		\$	\$	\$	\$	\$

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