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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		<b>Miscellaneous Income</b>				
Payer Name, LLC Address Line 1 City, State 00000 (555) 555-5555				\$		2016						
				2 Royalties								
				\$		Form 1099-MISC						
				PAYER'S federal identification number				RECIPIENT'S identification number		3 Other income		4 Federal income tax withheld
XX-XXXXXXX				YY-YYYYYYY3				5 Fishing boat proceeds		6 Medical and health care payments		
RECIPIENT'S name								7 Nonemployee compensation		8 Substitute payments in lieu of dividends or interest		
Street address (including apt. no.) Street Address Line 1 Line 2								\$ 9,875,383.39		\$		
City or town, state or province, country, and ZIP or foreign postal code City, State 11111								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				FATCA filing requirement <input type="checkbox"/>		2nd TIN not <input type="checkbox"/>		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

Cat. No. 14425J

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service

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				2 Royalties								
				\$		Form 1099-MISC						
				PAYER'S federal identification number				RECIPIENT'S identification number		3 Other income		4 Federal income tax withheld
XX-XXXXXXX				YY-YYYYYYY2				5 Fishing boat proceeds		6 Medical and health care payments		
RECIPIENT'S name								7 Nonemployee compensation		8 Substitute payments in lieu of dividends or interest		
Street address (including apt. no.) Street Address Line 1								\$ 999.00		\$		
City or town, state or province, country, and ZIP or foreign postal code City, State 11111								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		
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