9595	☐ VOID ☐ CORI	RECTED		
PAYER'S name, street address, city o or foreign postal code, and telephone	The state of the s	IP 1 Rents	OMB No. 1545-0115	
		\$		Miscellaneous
Payer Name, LLC Address Line 1		2 Royalties	20 14 '	Income
(555) 555-5555	City, State 00000		Form 1099-MISC	
(999) 999-9999		3 Other income	4 Federal income tax withheld	Copy A
PAYER'S federal identification number	DECIDIENTIO : destities aties accorde	s Fishing boat proceeds	\$ CM add and beath area assuments	For
PAYER'S rederal identification number	RECIPIENT'S identification numbe	5 Fishing boat proceeds	6 Medical and health care payments	Internal Revenue Service Center
XX-XXXXXXX	YY-YYYYYY1			
701700000		\$	\$	File with Form 1096.
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu of	For Privacy Act
A Vary Long Pocinio	nt Nama To Tact Widt	h	dividends or interest	and Paperwork
, , ,	nt Name To Test Widt	<u> </u>	Φ.	Reduction Act
Street address (including apt. no.)		9 Payer made direct sales of	\$ 10 Crop insurance proceeds	Notice, see the 2014 General
Street Address Line	1	\$5,000 or more of consumer	To Grop insurance proceeds	Instructions for
City or town, state or province, countr	ry, and ZIP or foreign postal code	products to a buyer (recipient) for resale ▶	\$	Certain
		11	12	Information
Long Name for a City	y, State 11111-1111			Returns.
Account number (see instructions)	2nd TIN i	not. 13 Excess golden parachute payments	14 Gross proceeds paid to an attorney	
XXXXX		payments	attorney	
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.	18 State income
13a Section 409A deletrais	13b Section 403A income	\$	17 Glate/1 ayer 3 State 110.	\$
\$	\$	\$		\$
	No. 14425J v	vww.irs.gov/form1099misc	Department of the Treasury -	Internal Revenue Service
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9595	□ VOID □ CORI	RECTED		
PAYER'S name, street address, city o			OMB No. 1545-0115	
or foreign postal code, and telephone	no.			
Payer Name, LLC		\$	2014	Miscellaneous
Address Line 1		2 Royalties		Income
City, State 00000		•	Form 1099-MISC	
(555) 555-5555		\$ 3 Other income	4 Federal income tax withheld	Copy A
		\$	\$	For
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				Service Center
XX-XXXXXXX	YY-YYYYYY2			
DECURIENTE:		\$	\$	File with Form 1096.
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	1 of thivacy Act
Recipient Name				and Paperwork
Recipient iname				
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City, State 11111 Account number (see instructions) 2nd TIN not. 13 Excess golden parachute 14 Gross proceeds paid to an payments attorney XXXXX 16 State tax withheld 15a Section 409A deferrals 15b Section 409A income 17 State/Payer's state no. 18 State income

11

\$5,000 or more of consumer

\$

12

products to a buyer

(recipient) for resale ▶

Instructions for

Certain

Returns.

Information

Street Address Line 1

City or town, state or province, country, and ZIP or foreign postal code

9595	☐ VOID ☐	CORRE	CTED			
PAYER'S name, street address, city or foreign postal code, and telephone	The state of the s	country, ZIP	1 Rents	OMB No. 1545-0115		
			\$		Miscellaneous	
Payer Name, LLC Address Line 1			2 Royalties	2014	Income	
City, State 00000						
(555) 555-5555			\$	Form 1099-MISC		0
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PAYER'S federal identification number	RECIPIENT'S identification	on number	5 Fishing boat proceeds	6 Medical and health care payments		Internal Revenue
XX-XXXXXXX YY-YYYYY3						Service Center
RECIPIENT'S name			\$7 Nonemployee compensation	\$ Substitute payments	in lieu of	File with Form 1096
TIEON IEIVI O Hame			1 Nonemployee compensation	dividends or interest		For Privacy Act and Paperwork
Recipient Name			9,875,383.39			Reduction Act
Street address (including apt. no.)	Street address (including apt. no.)			\$		Notice, see the
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City or town, state or province, count		al code	products to a buyer (recipient) for resale ▶	\$		Certair
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Form 1099-MISC Cat	\$		\$			\$
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9595 PAYER'S name, street address, city of	VOID	CORRE	1 Rents	OMB No. 1545-0115		
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			3 Other income	4 Federal income tax	withheld	Copy A
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					dividends or interest	
						and Paperwork Reduction Act
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			9 Payer made direct sales of \$5,000 or more of consumer	10 Crop insurance pro	ceeds	2014 General Instructions for
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16 State tax withheld

17 State/Payer's state no.

18 State income

15b Section 409A income

15a Section 409A deferrals