	☐ CORRE	CTED (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		1 Rents \$ 2 Royalties	OMB No. 1545-0115	Miscellaneous Income		
(555) 555-5555		\$	Form 1099-MISC			
,		3 Other income	4 Federal income tax wit	thheld	Copy B	
		\$	\$		For Recipient	
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care pay	ayments		
XX-XXXXXX	YY-YYYYYY3					
		\$	\$			
RECIPIENT'S name		7 Nonemployee compensation	8 Substitute payments in	ı lieu of	This is important tax	
Recipient Name		9,875,383.39	dividends or interest		information and is being furnished to	
Street address (including apt. no.)		\$			the Internal Revenue Service. If you are	
Street Address Line 1 Line 2		9 Payer made direct sales of \$5,000 or more of consumer products to a buyer	10 Crop insurance proceed			
City or town, state or province, country, and ZIP or foreign postal code		(recipient) for resale ►	\$		sanction may be	
City, State 11111		11	12		imposed on you if this income is taxable and the IRS	
Account number (see instructions)		13 Excess golden parachute	14 Gross proceeds paid t	to an	determines that it	
XXXXX		payments	attorney		has not been	
70000		\$	\$		reported.	
15a Section 400A deferrals	15h Section 409A income	16 State tax withheld	17 State/Paver's state no	, T	18 State income	

Form 1099-MISC

(keep for your records)

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service

	☐ CORRE	ECTED (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		1 Rents \$ 2 Royalties	OMB No. 1545-0115		Miscellaneous Income
(555) 555-5555		\$ 3 Other income	Form 1099-MISC 4 Federal income tax	withheld	Сору В
		\$	\$	withheld	For Recipient
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds	6 Medical and health care	payments	To recipient
XX-XXXXXX	YY-YYYYYY2				
		\$	\$		
RECIPIENT'S name		7 Nonemployee compensation	Substitute payments in lieu of dividends or interest		This is important tax
Recipient Name		000.00	dividends or interest	<u>[</u>	information and is being furnished to
		999.00	<b> </b>		the Internal Revenue
Street address (including apt. no.) Street Address Line 1		9 Payer made direct sales of	\$ 10 Crop insurance pro	ocode	Service. If you are required to file a
Street Address Line 1		\$5,000 or more of consumer			return, a negligence
City or town, state or province, country, and ZIP or foreign postal code		products to a buyer (recipient) for resale ►	\$		penalty or other sanction may be
City, State 11111		11	12		imposed on you if this income is
Account number (see instructions)		13 Excess golden parachute	14 Gross proceeds pa	id to an	taxable and the IRS determines that it
XXXXX		payments	attorney		has not been
		\$	\$		reported.
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state	no.	18 State income
		\$	ļ		\$
<b>  \$</b>	\$	\$			\$