	□ V	OID [CTED		
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	
Payer Name, LLC			\$	2020	Miscellaneous	
Address Line 1				2 Royalties		Income
City, State 00000				\$	Form 1099-MISC	
(555) 555-5555				3 Other income	4 Federal income tax w	ithheld
,				\$	\$	Copy 1
PAYER'S TIN	RECIPIEN	IT'S TIN		5 Fishing boat proceeds	6 Medical and health care pa	
XX-XXXXXX	YY-	YYYYY	Y3			·
				\$	\$	
RECIPIENT'S name			7 Payer made direct sales of \$5,000 or more of consumer	8 Substitute payments in dividends or interest	n lieu of	
Recipient Name				products to a buyer (recipient) for resale	\$	
Street address (including apt. no.)				9 Crop insurance proceeds	10 Gross proceeds paid	to an
Street Address Line 1 Line 2				 \$	attorney \$	
City or town, state or province, country, and ZIP or foreign postal code				11	12 Section 409A deferra	ls
City, State 11111				\$		
Account number (see instructions)		FATCA filin requiremen	~	13 Excess golden parachute payments	14 Nonqualified deferred compensation	d
XXXXX				\$	\$	
				15 State tax withheld	16 State/Payer's state no	o. 17 State income
				\$		\$
1000 11100				\$		\$
-orm 1000-MISC			/F 1 000 N	4100	D	

Form **1099-MISC**

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

	□V	OID [CORRE	CTED					
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	_			
Payer Name, LLC Address Line 1				\$ 2 Royalties	2020	 	Miscellaneous Income		
City, State 00000				\$	Form 1099-MISC				
(555) 555-5555				3 Other income	4 Federal income tax	withheld	ield		
				\$	\$	Сору			
PAYER'S TIN XX-XXXXXXX	RECIPIENT'S TIN YY-YYYYYY2			5 Fishing boat proceeds	6 Medical and health care	payments	For State Tax Department		
, , , , , , , , , , , , , , , , , , , ,				\$	\$				
RECIPIENT'S name				7 Payer made direct sales of	8 Substitute payments in lieu of				
Recipient Name				\$5,000 or more of consumer products to a buyer (recipient) for resale	dividends or interest				
Street address (including apt. no.)				9 Crop insurance proceeds	10 Gross proceeds paid to an				
Street Address Line 1					attorney \$				
				\$					
City or town, state or province, country, and ZIP or foreign postal code				11	12 Section 409A deferrals				
City, State 11111					Φ.				
A		FATCA filing		40 5	\$ 14 Nongualified deferre	!			
Account number (see instructions)		requirement		13 Excess golden parachute payments	compensation	∌u			
XXXXX				\$	\$				
				15 State tax withheld	16 State/Payer's state	no.	17 State income		
				\$			\$		
				<u> </u>			\$		