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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>2020</b>  Form <b>1099-MISC</b>	<b>Miscellaneous Income</b>
				\$		
				2 Royalties		
				\$		
				3 Other income	4 Federal income tax withheld	<b>Copy A For Internal Revenue Service Center</b>
				\$	\$	
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing boat proceeds	6 Medical and health care payments	<b>File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the 2020 General Instructions for Certain Information Returns.</b>		
		\$	\$			
RECIPIENT'S name		7 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest			
Street address (including apt. no.)		9 Crop insurance proceeds	10 Gross proceeds paid to an attorney			
City or town, state or province, country, and ZIP or foreign postal code		11	12 Section 409A deferrals			
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>	2nd TIN not <input type="checkbox"/>	13 Excess golden parachute payments	14 Nonqualified deferred compensation	
				\$	\$	
				15 State tax withheld	16 State/Payer's state no.	17 State income
				\$		\$
				\$		\$

Form **1099-MISC**

Cat. No. 14425J

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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