| | | | CORF | RECTED (if checked) | | |
|---|--|------------------------------|-----------|---|---|--|
| PAYER\'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. TEST COMPANY NAME TEST PAYERS ADDRESS FOR TESTING PURPOSE ONLY 20333, PUNE TEST PAYERSCITY, HI 65423 | | | , 1 \$ | Rents 30002.2 | OMB No. 1545-0115 2017 | Miscellaneous Income |
| | | | Y 2 \$ | Royalties 99000.1 | Form 1099-MISC | |
| | | | 3 | Other income 21456.22 | Federal Income tax withheld \$ 98745.55 | Copy B For Recipient |
| PAYER\'S TIN Payers Tin | | | | Fishing boat proceeds 89663.55 | 6 Medical and health care payments\$ 56654.58 | |
| RECIPIENT\'S name, street address (including apt. no.), city or town, state or province, country, ZIP or foreign postal code, and telephone no. TEST RECIPIENTS NAME TEST REC ADDRESS FOR TESING PURPOSE ONLY REC CITY, ID 12354 | | | | Payer made direct sales of \$5.000 or more of consumer products to a buyer (recipient) for resale | 8 Subsitute payments in lieu of dividends or interest\$ 98798.45 | This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be |
| | | | 9 | 9 Crop insurance proceeds | 10 Gross proceeds paid to an attorney | |
| Account number (see instructions) 3214523 | | FATCA filling requirement | , | 84563.22 | \$ 56478.44 | imposed on you if this income is taxable and |
| | | | 11 | 12345.55 | 12 Section 409A deferrals \$ 32142.23 | the IRS determines that it has not been reported. |
| | | | | B Excess golden parachute payments 64983.99 | 14 Nonqualified deferred compensation\$ 78966.33 | |
| | | | 15 | State tax withheld | 16 State/Payer\'s state no. 98789.33 | 17 State income |
| | | | \$ | 12333.33 | | \$ 2155.33 |

\$ 123.33

\$ 9876.33

98796.23

Form 1099-MISC

(keep for your records)

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service