	□ 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	
				\$	2021	Miscellaneous
			2 Royalties		Information	
				\$	Form 1099-MISC	
				3 Other income	4 Federal income tax with	
<u> </u>				\$	\$	Copy 1
PAYER'S TIN	TIN RECIPIENT'S TIN			5 Fishing boat proceeds	6 Medical and health care payr	For State Tax Department
				\$	\$	
RECIPIENT'S name				7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	8 Substitute payments in li dividends or interest	au of
Street address (including apt. no.)				9 Crop insurance proceeds	10 Gross proceeds paid to attorney	an
				\$	\$	
City or town, state or province, country, and ZIP or foreign postal code				11 Fish purchased for resale	12 Section 409A deferrals	
				\$	\$	
Account number (see instructions)		FATCA filing requirement		13 Excess golden parachute payments	14 Nonqualified deferred compensation	
				\$	\$	
				15 State tax withheld	16 State/Payer's state no.	17 State income
				\$	1	\$
				\$	T	\$

Form 1099-MISC

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service