		C	ORRE	CTED (if checked)			
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			
			\$ 2 Royalties	2017	I	Miscellaneous Income	
				\$	Form 1099-MISC		
				3 Other income	4 Federal income tax	withheld	Сору В
			\$	\$		For Recipient	
AYER'S federal identification number RECIPIENT'S identification number		number	5 Fishing boat proceeds	6 Medical and health care payments			
				\$	\$		
RECIPIENT'S name			7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest		This is important tax information and is being furnished to the Internal Revenue	
Street address (including apt. no.) City or town, state or province, country, and ZIP or foreign postal code			\$	\$		Service. If you are	
			9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale ►	10 Crop insurance pro	ceeds	required to file a return, a negligence penalty or other	
			11	12		sanction may be imposed on you if this income is taxable and the IRS	
Account number (see instructions)	I	FATCA filing requirement		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney		determines that it 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
				l s			\$

\$ Form **1099-MISC**

(keep for your records)

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service