

CORRECTED (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	Miscellaneous Information
		\$	Form 1099-MISC	
		2 Royalties	(Rev. January 2022)	
PAYER'S TIN		\$	For calendar year 20__	Copy B For Recipient
		3 Other income	4 Federal income tax withheld	
		\$	\$	
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		5 Fishing boat proceeds	6 Medical and health care payments	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 imposed on you if this income is taxable and the IRS determines that it has not been reported.
		\$	\$	
		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest	
9 Crop insurance proceeds	10 Gross proceeds paid to an attorney			
\$	\$			
11 Fish purchased for resale	12 Section 409A deferrals			
\$	\$			
13 FATCA filing requirement <input type="checkbox"/>	14 Excess golden parachute payments	15 Nonqualified deferred compensation		
\$	\$	\$		
Account number (see instructions)		16 State tax withheld	17 State/Payer's state no.	18 State income
		\$		\$
		\$		\$

DETACH BEFORE MAILING
 MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS

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