

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		Miscellaneous Information
		\$		Form 1099-MISC		
		2 Royalties		(Rev. January 2022)		
PAYER'S TIN		RECIPIENT'S TIN		For calendar year 20__		Copy C For Payer or State Copy or Copy 2
		\$		4 Federal income tax withheld		
		3 Other income		\$		
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		For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns.
		\$		\$		
		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		
Account number (see instructions)		13 FATCA filing requirement <input type="checkbox"/>		14 Excess golden parachute payments		
		\$		\$		
		15 Nonqualified deferred compensation				
2nd TIN not. <input type="checkbox"/>		16 State tax withheld		17 State/Payer's state no.		18 State income
		\$		\$		\$

Form **1099-MISC** (Rev. 1-2022)

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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LMC/LM2

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Department of the Treasury - Internal Revenue Service

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