

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
	2 Royalties \$	

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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
	2 Royalties \$	

9595  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		
		2 Royalties \$	<b>Miscellaneous Income</b>		
		3 Other income \$			
PAYER'S federal identification number	RECIPIENT'S identification number	4 Federal income tax withheld \$	<b>Copy A For Internal Revenue Service Center</b>		
		5 Fishing boat proceeds \$			
RECIPIENT'S name		6 Medical and health care payments \$	<b>File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.</b>		
Street address (including apt. no.)		7 Nonemployee compensation \$			
City or town, state or province, country, and ZIP or foreign postal code		8 Substitute payments in lieu of dividends or interest \$			
Account number (see instructions)	2nd TIN nct. <input type="checkbox"/>	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>	10 Crop insurance proceeds \$		
15a Section 409A deferrals \$	15b Section 409A income \$	11	12		
		13 Excess golden parachute payments \$	14 Gross proceeds paid to an attorney \$		
		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$	

Form **1099-MISC** 41-0852411 www.irs.gov/form1099misc Department of the Treasury - Internal Revenue Service  
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DETACH BEFORE MAILING  
MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS

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For Recipient**

Important tax information and is being furnished to Internal Revenue Service. If you are required to file a return, a negligence penalty or other action may be assessed on you if this income is not reported.

Income  
Revenue Service

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For Payer State Copy or Copy 2**

Privacy Act and Paperwork Reduction Act Notice, see the General Instructions for Certain Information Returns.

Income  
Revenue Service

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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents \$
		2 Royalties \$
		3 Other income \$
PAYER'S federal identification number	RECIPIENT'S identification number	4 Fishing boat proceeds \$
RECIPIENT'S name		5 Nonemployee compensation \$
Street address (including apt. no.)		6 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>
City or town, state or province, country, and ZIP or foreign postal code		7 Excess golden parachute payments \$
Account number (see instructions)	2nd TIN nct. <input type="checkbox"/>	8 State tax withheld \$
15a Section 409A deferrals \$	15b Section 409A income \$	9 State/Payer's state no.

Form **1099-MISC** LMA 41-0852411 5110 www.irs.gov



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IMPORTANT TAX RETURN DOCUMENT ENCLOSED