

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		<b>Miscellaneous Information</b>
		\$		Form <b>1099-MISC</b>		
		2 Royalties		(Rev. January 2022)		
		\$		For calendar year		<b>Copy C For Payer or State Copy or Copy 2</b>  For Privacy Act and Paperwork Reduction Act Notice, see the <b>current General Instructions for Certain Information Returns.</b>
3 Other income		\$		4 Federal income tax withheld		
PAYER'S TIN	RECIPIENT'S TIN	5 Fishing boat proceeds		6 Medical and health care payments		
		\$		\$		
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		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		
		\$		\$		
Account number (see instructions)	2nd TIN not. <input type="checkbox"/>	16 State tax withheld		17 State/Payer's state no.		18 State income
		\$		\$		\$

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