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☐ 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) | | |
| | | \$ | | For calendar year | | |
| | | 3 Other income | | 4 Federal income tax withheld | | Copy A For Internal Revenue Service Center |
| | | \$ | | \$ | | |
| PAYER'S TIN | RECIPIENT'S TIN | 5 Fishing boat proceeds | | 6 Medical and health care payments | | |
| | | | | | | |
| | | \$ | | \$ | | |
| RECIPIENT'S name | | 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 | | File with Form 1096. For Privacy Act and Paperwork Reduction Act Notice, see the current General Instructions for Certain Information Returns. |
| Street address (including apt. no.) | | 9 Crop insurance proceeds | | 10 Gross proceeds paid to an attorney | | |
| | | \$ | | \$ | | |
| City or town, state or province, country, and ZIP or foreign postal code | | 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) | | 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) 41-0852411

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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Department of the Treasury - Internal Revenue Service

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MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS