

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		2016	Miscellaneous Income		
		\$							
		2 Royalties							
PAYER'S federal identification number		RECIPIENT'S identification number		3 Other income		4 Federal income tax withheld			
				\$		\$			
				5 Fishing boat proceeds		6 Medical and health care payments		Copy A For Internal Revenue Service Center	
		\$		\$					
		7 Nonemployee compensation		8 Substitute payments in lieu of dividends or interest		File with Form 1096.			
RECIPIENT'S name									
Street address (including apt. no.)		\$		\$			For Privacy Act and Paperwork Reduction Act Notice, see the 2016 General Instructions for Certain Information Returns.		
City or town, state or province, country, and ZIP or foreign postal code		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					
		11		12					
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>		2nd TIN not <input type="checkbox"/>		13 Excess golden parachute payments			
						\$			
15a Section 409A deferrals		15b Section 409A income		16 State tax withheld		17 State/Payer's state no.		18 State income	
\$		\$		\$				\$	

Form 1099-MISC

Cat. No. 14425J

www.irs.gov/form1099misc

Department of the Treasury - Internal Revenue Service

Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page