

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	
		\$		Form 1099-MISC	
		2 Royalties		(Rev. January 2022)	
PAYER'S TIN		RECIPIENT'S TIN		For calendar year	
		\$		20 ____	
		3 Other income		4 Federal income tax withheld	
RECIPIENT'S name		5 Fishing boat proceeds		6 Medical and health care payments	
Street address (including apt. no.)		\$		\$	
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	
13 FATCA filing requirement <input type="checkbox"/>		9 Crop insurance proceeds		10 Gross proceeds paid to an attorney	
		\$		\$	
		11 Fish purchased for resale		12 Section 409A deferrals	
Account number (see instructions)		14 Excess golden parachute payments		15 Nonqualified deferred compensation	
		\$		\$	
		16 State tax withheld		17 State/Payer's state no.	
		\$			
		\$		18 State income	
				\$	

Miscellaneous Information

Copy B For Recipient

This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.