

# Reporting

<input type="checkbox"/> VOID <input type="checkbox"/> CORRECTED		OMB No. 1545-0115	
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.		1 Rents	2019
		\$	
		2 Royalties	Form 1099-MISC
PAYER'S TIN		3 Other income	4 Federal income tax withheld
		\$	\$
RECIPIENT'S TIN		5 Fishing boat proceeds	6 Medical and health care payments
RECIPIENT'S name		\$	\$
		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest
		\$	\$
Street address (including apt. no.)		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
City or town, state or province, country, and ZIP or foreign postal code		\$	\$
Account number (see instructions)		11	12
FATCA filing requirement <input type="checkbox"/>		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney
\$		\$	\$
15a Section 409A deferrals	15b Section 409A income	16 State tax withheld	17 State/Payer's state no.
\$	\$	\$	

Form 1099-MISC [www.irs.gov/Form1099MISC](http://www.irs.gov/Form1099MISC) Department of the Treasury

Miscellaneous Income  
Copy 1 For State Tax Department

2222		a Employee's social security number		OMB No. 1545-0008	
b Employer identification number (EIN)			1 Wages, tips, other compensation	2 Federal income tax withheld	
c Employer's name, address, and ZIP code			3 Social security wages	4 Social security tax withheld	
			5 Medicare wages and tips	6 Medicare tax withheld	
			7 Social security tips	8 Allocated tips	
d Control number			9	10 Dependent care benefits	
e Employee's first name and initial Last name Suff.			11 Nonqualified plans		12a
			13 Statutory employee <input type="checkbox"/> Retirement plan <input type="checkbox"/> Third-party sick pay <input type="checkbox"/>	12b	
			14 Other		12c
					12d
f Employee's address and ZIP code					
15 State	Employer's state ID number	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax
					20 Locality name