

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	
		\$		<b>2020</b>	
		2 Royalties			
PAYER'S TIN		RECIPIENT'S TIN		3 Other income	
		\$		4 Federal income tax withheld	
PAYER'S TIN		RECIPIENT'S TIN		5 Fishing boat proceeds	
				\$	
RECIPIENT'S name		7 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input type="checkbox"/>		6 Medical and health care payments	
Street address (including apt. no.)		9 Crop insurance proceeds		8 Substitute payments in lieu of dividends or interest	
City or town, state or province, country, and ZIP or foreign postal code		11		10 Gross proceeds paid to an attorney	
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>		12 Section 409A deferrals	
		2nd TIN not <input type="checkbox"/>		\$	
		13 Excess golden parachute payments		14 Nonqualified deferred compensation	
		\$		\$	
		15 State tax withheld		16 State/Payer's state no.	
		\$		17 State income	
		\$		\$	

**Miscellaneous  
Income****Copy A  
For  
Internal Revenue  
Service Center**File with Form 1096.  
For Privacy Act  
and Paperwork  
Reduction Act  
Notice, see the  
**2020 General  
Instructions for  
Certain  
Information  
Returns.**Form **1099-MISC**

Cat. No. 14425J

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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