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FORM 7154-3 3PT/TCM3

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FORM 7154-3 3PT/TCM3

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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 Income	
		\$		2020			
		2 Royalties		Form 1099-MISC			
		\$		3 Other income		4 Federal income tax withheld	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.
		\$		5 Fishing boat proceeds		6 Medical and health care payments	
PAYER'S TIN		RECIPIENT'S TIN					
				\$		\$	
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"/>		8 Substitute payments in lieu of dividends or interest			
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		12 Section 409A deferrals			
				\$			
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>	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	
		\$				\$	
		\$				\$	

Form 1099-MISC

41-0852411

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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