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PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. <b>Ocrolus Inc.</b> <b>101 Greenwich Street</b> <b>Floor 23</b> <b>New York, NY 10006</b>				<b>1 Rents</b> <b>\$ 12000.00</b>		OMB No. 1545-0115 <b>2019</b>		<b>Miscellaneous Income</b>	
				<b>2 Royalties</b> <b>\$</b>		Form <b>1099-MISC</b>			
				<b>3 Other income</b> <b>\$ 123.00</b>		<b>4 Federal income tax withheld</b> <b>\$ 400.00</b>			
PAYER'S TIN		RECIPIENT'S TIN		<b>5 Fishing boat proceeds</b> <b>\$</b>		<b>6 Medical and health care payments</b> <b>\$</b>		<b>Copy A</b> <b>For Internal Revenue Service Center</b>  <b>File with Form 1096.</b>  <b>For Privacy Act and Paperwork Reduction Act Notice, see the 2019 General Instructions for Certain Information Returns.</b>	
RECIPIENT'S name <b>Sam Bobley</b>		<b>7 Nonemployee compensation</b> <b>\$ 224.00</b>		<b>8 Substitute payments in lieu of dividends or interest</b> <b>\$ 335.00</b>					
Street address (including apt. no.) <b>123 Main Street</b>		<b>9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale</b> <input type="checkbox"/>		<b>10 Crop insurance proceeds</b> <b>\$</b>					
City or town, state or province, country, and ZIP or foreign postal code <b>New York, NY 10001</b>		<b>11</b>		<b>12</b>					
Account number (see instructions) <b>00000123467658</b>		FATCA filing requirement <input checked="" type="checkbox"/>		2nd TIN not. <input type="checkbox"/>		<b>13 Excess golden parachute payments</b> <b>\$</b>		<b>14 Gross proceeds paid to an attorney</b> <b>\$</b>	
<b>15a Section 409A deferrals</b> <b>\$</b>		<b>15b Section 409A income</b> <b>\$</b>		<b>16 State tax withheld</b> <b>\$</b>		<b>17 State/Payer's state no.</b> <b>ST 123456</b>		<b>18 State income</b> <b>\$</b>	

Form **1099-MISC**

Cat. No. 14425J

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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