

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>2018</b> Form <b>1099-MISC</b>	<b>Miscellaneous Income</b>
		\$			
		2 Royalties			
		\$			
3 Other income		4 Federal income tax withheld		<b>Copy C For Payer or State Copy or Copy 2</b>	
\$		\$			
PAYER'S TIN		RECIPIENT'S TIN			
5 Fishing boat proceeds		6 Medical and health care payments		For Privacy Act and Paperwork Reduction Act Notice, see the <b>2018 General Instructions for Certain Information Returns.</b>	
\$		\$			
RECIPIENT'S name, street address, city or town, state or province, country, and ZIP or foreign postal code		7 Nonemployee compensation			
		\$			
		8 Substitute payments in lieu of dividends or interest			
		\$			
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			
\$		\$			
11		12			
Account number (see instructions)		FATCA filing requirement <input type="checkbox"/>	2nd TIN not. <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.	
				\$	
				18 State income	
				\$	

Form **1099-MISC**

[www.irs.gov/Form1099MISC](http://www.irs.gov/Form1099MISC)

Department of the Treasury - Internal Revenue Service

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Form **1099-MISC**

LMC/LM2

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Department of the Treasury - Internal Revenue Service

DETACH BEFORE MAILING  
MANUFACTURED ON OCR LASER BOND PAPER USING HEAT RESISTANT INKS