

CORRECTED (if checked)

PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no. FILER TY 2019 FILER NAME 2 ADDRESS LINE 1 ADDRESS LINE 2 Calabasas, CA 91302 (818) 555-5555		1 Rents \$ 1464.00	OMB No. 1545-0115 2019 Form 1099-MISC	Miscellaneous Income
PAYER'S TIN 19-1111111		2 Royalties \$	3 Other income \$	
RECIPIENT'S TIN XXX-XX-1234		4 Federal income tax withheld \$	5 Fishing boat proceeds \$	Copy 2 To be filed with recipient's state income tax return, when required.
RECIPIENT'S name Charlie Tuna Apt 2506 1000 Ocean St Santa Monica, CA 90402		6 Medical and health care payments \$	7 Nonemployee compensation \$ 8000.00	
Account number (see instructions) AC-56		FATCA filing requirement <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest \$	
15a Section 409A deferrals \$ 50.01		13 Excess golden parachute payments \$	9 Payer made direct sales of \$5,000 or more of consumer products to a buyer (recipient) for resale <input checked="" type="checkbox"/>	
15b Section 409A income \$ 250.01		14 Gross proceeds paid to an attorney \$	10 Crop insurance proceeds \$	
		11	12	
		16 State tax withheld \$	17 State/Payer's state no.	18 State income \$

Form 1099-MISC

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

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Account number (see instructions) AC-56		FATCA filing requirement <input type="checkbox"/>	8 Substitute payments in lieu of dividends or interest \$	This is important tax information and is being furnished to the IRS. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.
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