

CORRECTED (if checked)

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 2017 Form 1099-MISC	Miscellaneous Income
		\$			
		2 Royalties			
		\$			
		3 Other income		4 Federal income tax withheld	
		\$		\$	
PAYER'S federal identification number	RECIPIENT'S identification number	5 Fishing boat proceeds		6 Medical and health care payments	
		\$		\$	
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"/>		13 Excess golden parachute payments	
				\$	
15a Section 409A deferrals		15b Section 409A income		14 Gross proceeds paid to an attorney	
\$		\$		\$	
		16 State tax withheld		17 State/Payer's state no.	
		\$		\$	
				18 State income	
				\$	

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

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