

Attention:

Copy A of this form is provided for informational purposes only. Copy A appears in red, similar to the official IRS form. The official printed version of Copy A of this IRS form is scannable, but the online version of it, printed from this website, is not. Do **not** print and file copy A downloaded from this website; a penalty may be imposed for filing with the IRS information return forms that can't be scanned. See part O in the current General Instructions for Certain Information Returns, available at IRS.gov/Form1099, for more information about penalties.

Please note that Copy B and other copies of this form, which appear in black, may be downloaded and printed and used to satisfy the requirement to provide the information to the recipient.

If you have 10 or more information returns to file, you may be required to file e-file. Go to <u>IRS.gov/InfoReturn</u> for e-file options.

If you have fewer than 10 information returns to file, we strongly encourage you to e-file. If you want to file them on paper, you can place an order for the official IRS information returns, which include a scannable Copy A for filing with the IRS and all other applicable copies of the form, at <u>IRS.gov/EmployerForms</u>. We'll mail you the forms you request and their instructions, as well as any publications you may order.

See Publications <u>1141</u>, <u>1167</u>, and <u>1179</u> for more information about printing these forms.

9595		VOID	CORR	ECTED		
PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone no.			P 1 Rents	OMB No. 1545-0115		
				\$	Form 1099-MISC	Miscellaneous
				2 Royalties	(Rev. April 2025)	Information
					For calendar year	
				\$		
				3 Other income	4 Federal income tax withh	eld Copy A
				\$	\$	For
PAYER'S TIN	RECIPIENT'S TIN			5 Fishing boat proceeds	6 Medical and health care payments	Internal Revenue Service Center
				\$	\$	
RECIPIENT'S name				 Ψ 7 Payer made direct sales 	 Ψ 8 Substitute payments in li 	For filing information,
				totaling \$5,000 or more of		Privacy Act, and
				consumer products to recipient for resale	\$	Paperwork
Street address (including apt. no.)			9 Crop insurance proceeds		an Reduction Act	
				\$	\$	Notice, see the General
City or town, state or province, coun	try, and	d ZIP or foreign	oostal code	11 Fish purchased for resale	12 Section 409A deferrals	Instructions for Certain
				\$	\$	Information
			13 FATCA filin requiremen	•	15 Nonqualified deferred compensation	Returns.
					\$	www.irs.gov/Form1099
Account number (see instructions)			2nd TIN not	16 State tax withheld	17 State/Payer's state no.	18 State income
				\$		\$
				\$		\$

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PAYER'S name, street address, city or town, state or province, country, ZIP			1 Rents	OMB No. 1545-0115		
or foreign postal code, and telep	hone no.					
			\$	Form 1099-MISC	Miscellaneous	
			2 Royalties	(Rev. April 2025)	Information	
				For calendar year		
			\$			
			3 Other income	4 Federal income tax withhe	d Copy 1	
			\$	\$	For State Tax	
PAYER'S TIN	RECIPIENT'S	ΓΙΝ	5 Fishing boat proceeds	6 Medical and health care payments	Department	
			\$	\$	_	
RECIPIENT'S name		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	8 Substitute payments in lie of dividends or interest\$	u		
Street address (including apt. no.)			9 Crop insurance proceeds	10 Gross proceeds paid to a attorney	1	
			\$	\$		
City or town, state or province, country, and ZIP or foreign postal code			11 Fish purchased for resale	12 Section 409A deferrals		
			\$	\$		
		13 FATCA filing requirement	14	15 Nonqualified deferred compensation		
				\$		
Account number (see instruction	s)		16 State tax withheld	17 State/Payer's state no.	18 State income	
			\$		\$	
			\$		\$	
- 1000 MICC (5 / 00	0.5)					

Form **1099-MISC** (Rev. 4-2025)

www.irs.gov/Form1099MISC

Department of the Treasury - Internal Revenue Service

	ECTED (if checked)			
YER'S name, street address, city or town, state or province, country, ZI	P 1 Rents	OMB No. 1545-0115		
oreign postal code, and telephone no.	\$	Form 1099-MISC	Miscellaneous	
	2 Royalties	(Rev. April 2025)	Information	
		For calendar year		
	\$			
	3 Other income	4 Federal income tax withhe	eld Copy B	
	\$	\$	For Recipient	
YER'S TIN RECIPIENT'S TIN	5 Fishing boat proceeds	6 Medical and health care payments		
	\$	\$		
CIPIENT'S name	7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	8 Substitute payments in lie of dividends or interest	This is important tax information and is being furnished to	
eet address (including apt. no.)	9 Crop insurance proceeds	10 Gross proceeds paid to a attorney	n the IRS. If you are required to file a return, a negligence	
	\$	\$	penalty or other	
v or town, state or province, country, and ZIP or foreign postal code	11 Fish purchased for resale	12 Section 409A deferrals	sanction may be imposed on you if this income is	
	\$	\$	taxable and the IRS	
13 FATCA fili requireme	0	15 Nonqualified deferred compensation \$	determines that it has not been reported.	
count number (see instructions)	16 State tax withheld	17 State/Payer's state no.	18 State income	
	\$		\$	
	\$		\$	

Instructions for Recipient

Recipient's taxpayer identification number (TIN). For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN). However, the payer has reported your complete TIN to the IRS.

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Amounts shown may be subject to self-employment (SE) tax. Individuals should see the Instructions for Schedule SE (Form 1040). Corporations, fiduciaries, or partnerships must report the amounts on the appropriate line of their tax returns.

Form 1099-MISC incorrect? If this form is incorrect or has been issued in error, contact the payer. If you cannot get this form corrected, attach an explanation to your tax return and report your information correctly.

Box 1. Report rents from real estate on Schedule E (Form 1040). However, report rents on Schedule C (Form 1040) if you provided significant services to the tenant, sold real estate as a business, or rented personal property as a business. See Pub. 527.

Box 2. Report royalties from oil, gas, or mineral properties; copyrights; and patents on Schedule E (Form 1040). However, report payments for a working interest as explained in the Schedule E (Form 1040) instructions. For royalties on timber, coal, and iron ore, see Pub. 544.

Box 3. Generally, report this amount on the "Other income" line of Schedule 1 (Form 1040) and identify the payment. The amount shown may be payments received as the beneficiary of a deceased employee, prizes, awards, taxable damages, Indian gaming profits, or other taxable income. See Pub. 525. If it is trade or business income, report this amount on Schedule C or F (Form 1040).

Box 4. Shows backup withholding or withholding on Indian gaming profits. Generally, a payer must backup withhold if you did not furnish your TIN. See Form W-9 and Pub. 505 for more information. Report this amount on your income tax return as tax withheld.

Box 5. Shows the amount paid to you as a fishing boat crew member by the operator, who considers you to be self-employed. Self-employed individuals must report this amount on Schedule C (Form 1040). See Pub. 334.

Box 6. For individuals, report on Schedule C (Form 1040).

Box 7. If checked, consumer products totaling \$5,000 or more were sold to you for resale, on a buy-sell, a deposit-commission, or other basis. Generally, report any income from your sale of these products on Schedule C (Form 1040).

Box 8. Shows substitute payments in lieu of dividends or tax-exempt interest received by your broker on your behalf as a result of a loan of your securities. Report on the "Other income" line of Schedule 1 (Form 1040).

Box 9. Report this amount on Schedule F (Form 1040).

Box 10. Shows gross proceeds paid to an attorney in connection with legal services. Report only the taxable part as income on your return.

Box 11. Shows the amount of cash you received for the sale of fish if you are in the trade or business of catching fish.

Box 12. May show current year deferrals as a nonemployee under a nonqualified deferred compensation (NQDC) plan that is subject to the requirements of section 409A plus any earnings on current and prior year deferrals.

Box 13. If the FATCA filing requirement box is checked, the payer is reporting on this Form 1099 to satisfy its account reporting requirement under chapter 4 of the Internal Revenue Code. You may also have a filing requirement. See the Instructions for Form 8938.

Box 14. Reserved for future use.

Box 15. Shows income as a nonemployee under an NQDC plan that does not meet the requirements of section 409A. Any amount included in box 12 that is currently taxable is also included in this box. Report this amount as income on your tax return. This income is also subject to a substantial additional tax to be reported on Form 1040, 1040-SR, or 1040-NR. See the instructions for your tax return.

Boxes 16-18. Show state or local income tax withheld from the payments.

Future developments. For the latest information about developments related to Form 1099-MISC and its instructions, such as legislation enacted after they were published, go to *www.irs.gov/Form1099MISC*.

Free File Program. Go to www.irs.gov/FreeFile to see if you qualify for no-cost online federal tax preparation, e-filing, and direct deposit or payment options.

		RRE	CTED (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			
			\$	Form 1099-MISC	Ν	Miscellaneous	
			2 Royalties	(Rev. April 2025)		Information	
				For calendar year			
			\$				
			3 Other income	4 Federal income tax w	rithheld	Copy 2	
			\$	\$		To be filed with	
PAYER'S TIN	RECIPIENT'S TIN		5 Fishing boat proceeds	6 Medical and health c payments	Medical and health care recipyments whether the second sec		
			\$	\$			
RECIPIENT'S name		7 Payer made direct sales totaling \$5,000 or more of consumer products to recipient for resale	8 Substitute payments of dividends or intere\$				
Street address (including apt. no.)			9 Crop insurance proceeds	10 Gross proceeds paid attorney	l to an		
			\$	\$			
City or town, state or province, c	ountry, and ZIP or foreign postal cod	е	11 Fish purchased for resale	12 Section 409A deferra	als		
			\$	\$			
	13 FATC requir	CA filing rement	14	15 Nonqualified deferred compensation	d		
Account number (see instructions)			16 State tax withheld \$	17 State/Payer's state n		18 State income	
			\$	1		\$	
Form 1099-MISC (Rev. 4-20)	25) www.irs.g	gov/For	m1099MISC	Department of the Tre	easury - I	nternal Revenue Service	