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If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

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CORRECTED

PAYER'S name, street address, city, state, and ZIP code		1 Rents	OMB No. 1545-0115	<b>Miscellaneous Income</b>	
		\$	<b>2002</b>		
		2 Royalties			Form <b>1099-MISC</b>
PAYER'S Federal identification number		3 Other income	4 Federal income tax withheld	<b>Copy A For Internal Revenue Service Center</b>	
		\$	\$		
RECIPIENT'S identification number		5 Fishing boat proceeds	6 Medical and health care payments		<b>File with Form 1096.</b>
RECIPIENT'S name		\$	\$		
Street address (including apt. no.)		7 Nonemployee compensation	8 Substitute payments in lieu of dividends or interest	<b>For Privacy Act and Paperwork Reduction Act Notice, see the 2002 General Instructions for Forms 1099, 1098, 5498, and W-2G.</b>	
City, state, and ZIP code		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		
Account number (optional)		11	12		
2nd TIN not <input type="checkbox"/>		13 Excess golden parachute payments	14 Gross proceeds paid to an attorney		
15		\$	\$		
		16 State tax withheld	17 State/Payer's state no.	18 State income	
		\$	\$	\$	
		\$	\$	\$	

Form **1099-MISC**

Cat. No. 14425J

Department of the Treasury - Internal Revenue Service

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